



U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh Street, S.W.
Washington, D.C. 20590

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

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AUTO SAFETY HOTLINE
(800) 424-9393
Wash. D.C. Area 366-0123



CASE SUMMARY

PSU 41 CASE NO. 052C TYPE OF ACCIDENT Vehicle/Guardrail/Guardrail

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. Do not include any personal identifiers. Use reverse side if needed.)

Vehicle #1 was traveling at approximately 55mph on a state road. Vehicle 1 had switched lanes from the far left lane to the center lane. After switching lanes a phantom vehicle attempted to change lanes to the center lane as well, which was occupied by vehicle 1. Vehicle 1 quick steered to the left to avoid collision with phantom vehicle. Upon doing so vehicle 1 turned in a counterclockwise

B. VEHICLE PROFILE(S)

Vehicle No.	Class of Vehicle	Year/Make/Model	Most Severe Damage		Component Failure
			Damage Plane	Severity Description	
01	Intermediate	1986/chevrolet Montecarlo	Front	Severe	None

C. PERSON PROFILE(S)

Vehicle No.	Person Role	Seat Position	Restraint Use	Most Severe Injury			
				Body Region	Lesion	AIS	Injury Source
01	Driver	Front Left	None	chest	puncture	3	Ground
02	Passenger	Front Right	None	Face	Laceration	1	Windshield
03	Passenger	Rear Left	None	Head	Laceration	2	Ground
04	Passenger	Rear Right	None	Arm	Fracture	3	Ground

DO NOT SANITIZE THIS FORM

fashion striking the east side guardrail with its Right Side, following across the interstate where the front of the vehicle came in contact with the guardrail on the west Road edge. The Driver, occupant #3 & 4 were fully ejected.



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ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number 41 Case Number—Stratum 052C

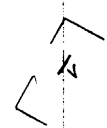
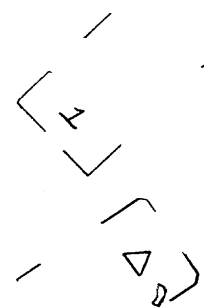
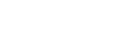
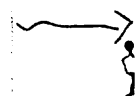
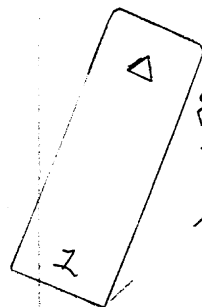
ACCIDENT COLLISION DIAGRAM		CRASH DATA
<p>LEVEL I PHYSICAL EVIDENCE ABSENT</p> <p>To be accomplished when there is no physical evidence present at the scene:</p> <p>*approximate vehicle orientation at impact and final rest</p> <p>*applicable road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, etc.)</p> <p>*applicable traffic controls (e.g., speed limit)</p> <p>*north arrow placed on diagram</p> <p>*sketch required</p>	<p>LEVEL II (Cont'd) accomplished when physical evidence is present:</p> <p>*document reference point and reference line relative to physical features present at the scene</p> <p>*scaled documentation of all accident induced physical evidence</p> <p>*scaled documentation of all roadside objects contacted</p> <p>*roadway surface type and condition of applicable roadways</p> <p>*grade measurements for all applicable roadways</p> <p>*scaled representations of the vehicle(s) at pre-impact, impact, and final rest based upon either:</p> <p>a) physical evidence, or</p> <p>b) reconstructed accident dynamics</p>	<p>VEH. #1 VEH. #2 VEH. #3</p> <p>Heading Angle <u>998</u> <u>998</u> <u>-</u></p> <p>Surface Type <u>BIT</u> <u>-</u> <u>-</u></p> <p>Surface Condition <u>BIT</u> <u>-</u> <u>-</u></p> <p>Grade Measurement (v/h) <u>+1.8/48 = +.04</u> <u>-</u> <u>-</u></p>
<p>LEVEL II PHYSICAL EVIDENCE PRESENT</p> <p>In addition to the Level I tasks noted above, the following must be</p>		

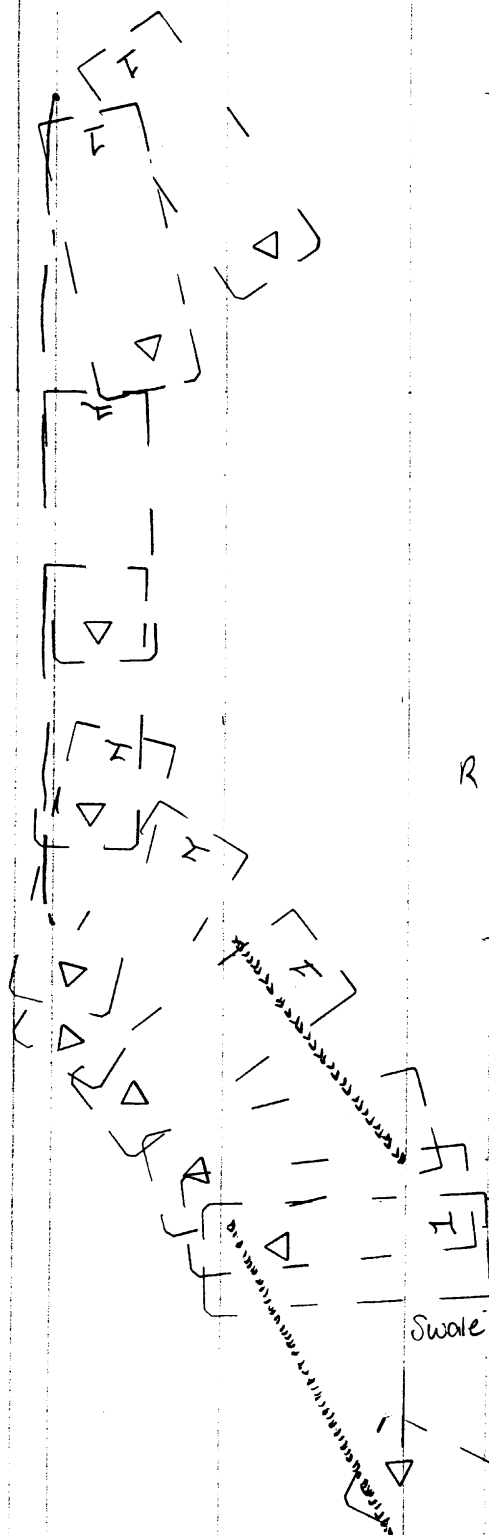
Reference Point: [REDACTED]

Reference Line: [REDACTED]

Item	Distance and Direction from Reference Point	Distance and Direction from Reference Line
FRONT Yaw mark Begins	8'6" S	5'4" E
" " Ends	24'8" S	13'11" E
BACK Yaw mark Begins	28'0" S	4'11" E
" " Ends	39'8" S	13'3" E
Note: following Gauge marks unrelated to this accident		
Gauge marks	39'8" S	20'4" E
	41'8" S	20'4" E
	52'5" S	19'8" E
	58'10" S	19'1" E
	65'2" S	18'6" E
	71'7" S	18'6" E
	84'1" S	19'2" E

[illegible]





Note: 1/10 scale

Ø52C

Road: Bituminous

Condition: Dry

Grade: +.04

Speed Limit: 55mph

RL #2

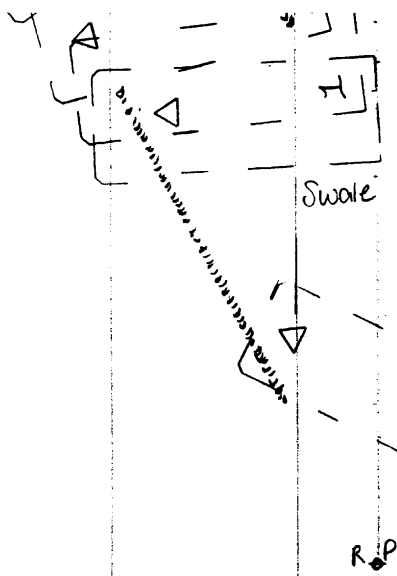
RL #1

Swale

R.P.

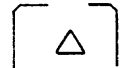
• R.P.
Light
pole

(FPL)

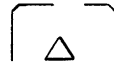


R.O.P.

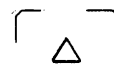
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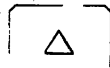
Phantom
vehicle



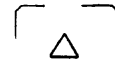
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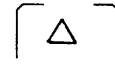
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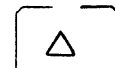
1



Ph.
veh.



Phan
veh



Phantom
vehicle

RP.
Light-
pole
(EPL)

Vehicle

△

△

Ph.
ven.

1

△

Phan
ven

△

1

△

Phantom
Vehicle

△

1

△

1



EXTERIOR VEHICLE FORM

1. Primary Sampling Unit Number <u>41</u>	3. Vehicle Number <u>01</u>
2. Case Number—Stratum <u>052C</u>	

VEHICLE IDENTIFICATION

VIN 1G1GZ37Z3GR XXXXXXXXXX Model Year 1986
 Vehicle Make (specify): Chevrolet Vehicle Model (specify): Monte Carlo Luxury
SPT.

LOCATOR

Locate the end of the damage with respect to the vehicle longitudinal center line or bumper corner for end impacts or an undamaged axle for side impacts.

Specific Impact No.	Location of Direct Damage	Location of Field L
01	Begins 5.3 inches forward of (R) Rear axle	Begins 40.3" Rearward of (R) Rear axle
02	Begins (C) Front bumper corner	Total Front end plane

CRUSH PROFILE

NOTES: Identify the plane at which the C-measurements are taken (e.g., at bumper, above bumper, at sill, above sill, etc.) and label adjustments (e.g., free space).

Measure and document on the vehicle diagram the location of maximum crush.

Measure C1 to C6 from driver to passenger side in front or rear impacts and rear to front in side impacts.

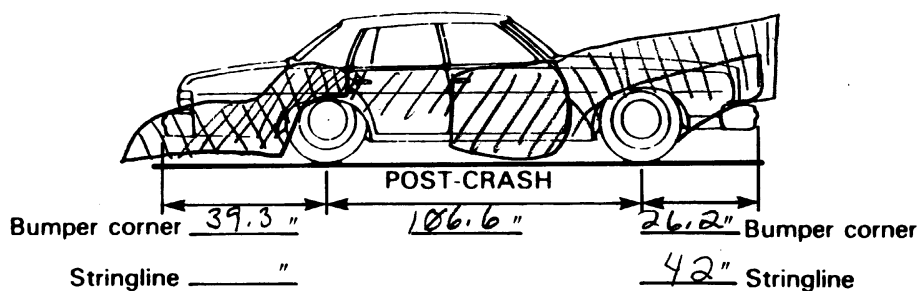
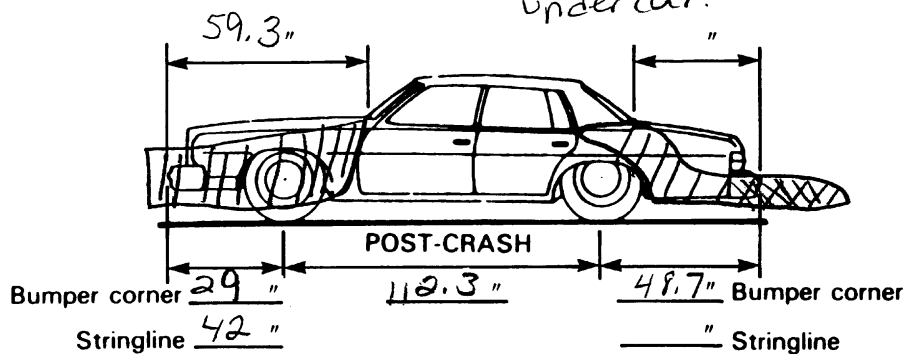
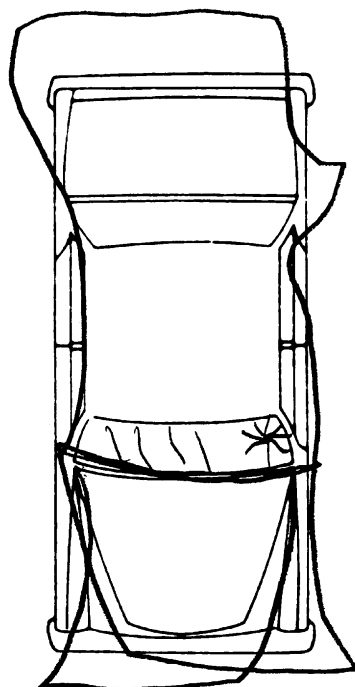
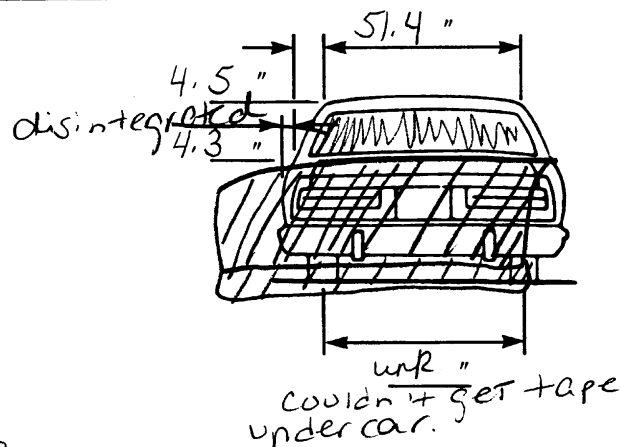
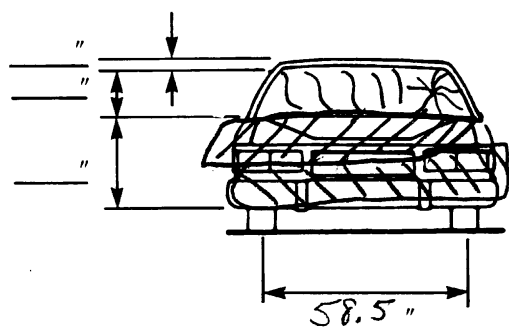
Free space value is defined as the distance between the baseline and the original body contour taken at the individual C locations. This may include the following: bumper lead, bumper taper, side protrusion, side taper, etc. Record the value for each C-measurement and maximum crush.

Use as many lines/columns as necessary to describe each damage profile.

Specific Impact Number	Plane of C-Measurements	Direct Damage		Field L	C ₁	C ₂	C ₃	C ₄	C ₅	C ₆	± D
		Width (CDC)	Max Crush								
01	mid-door level	39"	4.0	64.5	1.3	3.2	4.0	3.2	1.3	0.5	-63
	- free space				.0	.0	.0	0.1	0.3	0.5	
	=										
	Resultant				1.3	3.2	4.0	3.1	1.0	0.0	
02	Front end plane	38.5"	12.9	50.8	13.3	10.7	11.0	12.9	14.0	13.5	0
	Note: measured from where the bumper would have been.										
	- free space				1.8	1.3	0.0	0.0	1.3	1.8	
	= Resultant				11.5	9.4	11.0	12.9	12.7	11.7	0

VEHICLE DAMAGE SKETCH

TIRE – WHEEL DAMAGE a. Rotation physically restricted RF <u>2</u> LF <u>2</u> RR <u>1</u> LR <u>2</u> (1) Yes (2) No (8) NA (9) Unk.		ORIGINAL SPECIFICATIONS Wheelbase <u>108.0</u> Overall Length <u>200.4</u> Maximum Width <u>71.8</u> Curb Weight <u>3177</u> Average Track <u>58.5</u> Front Overhang <u>37.8</u> Rear Overhang <u>54.6</u> Engine Size: cyl./ displ. <u>1.5L 4 280L</u> Undeformed End Width _____		WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only) RF ± <u>00</u> ° LF ± <u>00</u> ° RR ± <u>00</u> ° LR ± <u>00</u> ° Within ±5 degrees
TYPE OF TRANSMISSION <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic		DRIVE WHEELS <input type="checkbox"/> FWD <input checked="" type="checkbox"/> RWD <input type="checkbox"/> 4WD		
		Approximate Cargo Weight <u>0</u>		



NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewall, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.
Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

CODES FOR OBJECT CONTACTED

(99) Unknown event or object

Guardrail

[illegible]



INTERIOR VEHICLE FORM

1. Primary Sampling Unit Number

41

2. Case Number – Stratum

052C

3. Vehicle Number

01

INTEGRITY

4. Passenger Compartment Integrity

98

(00) No integrity loss

Yes, Integrity Was Lost Through

(01) Windshield

(02) Door (side)

(03) Door/hatch (rear)

(04) Roof

(05) Roof glass

(06) Side window

(07) Rear window

(08) Roof and roof glass

(09) Windshield and door (side)

(10) Windshield and roof

(11) Side and rear window

(98) Other combination of above (specify):

FRONT WINDOW + REAR WINDOW

(99) Unknown

Door, Tailgate Or Hatch Opening

5. LF 1 6. RF 3 7. LR 0 8. RR 0 9. TG/H 0

(0) No door/gate/hatch

(1) Door/gate/hatch remained closed and operational

(2) Door/gate/hatch came open during collision

(3) Door/gate/hatch jammed shut

(8) Other (specify):

(9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then Code 0.

10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

(0) No door/gate/hatch or door not opened

Door, Tailgate, or Hatch Came Open During Collision

(1) Door operational (no damage)

(2) Latch/striker failure due to damage

(3) Hinge failure due to damage

(4) Door structure failure due to damage

(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage

(6) Latch/striker and hinge failure due to damage

(8) Other failure (specify):

(9) Unknown

GLAZING

Glazing Damage from Impact Forces

15. WS 2 16. LF 0 17. RF 6 18. LR 0 19. RR 0
20. BL 6 21. Roof 8 22. Other 8

(0) No glazing damage from impact forces

(2) Glazing in place and cracked from impact forces

(3) Glazing in place and holed from impact forces

(4) Glazing out-of-place (cracked or not) and not holed from impact forces

(5) Glazing out-of-place and holed from impact forces

(6) Glazing disintegrated from impact forces

(7) Glazing removed prior to accident

(8) No glazing

(9) Unknown if damaged

Glazing Damage from Occupant Contact

23. WS 2 24. LF 0 25. RF 0 26. LR 0 27. RR 0
28. BL 0 29. Roof 0 30. Other 0

(0) No occupant contact to glazing or no glazing

(1) Glazing contacted by occupant but no glazing damage

(2) Glazing in place and cracked by occupant contact

(3) Glazing in place and holed by occupant contact

(4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact

(5) Glazing out-of-place by occupant contact and holed by occupant contact

(6) Glazing disintegrated by occupant contact

(9) Unknown if contacted by occupant

If No Glazing Damage **And** No Occupant Contact or No Glazing, Then Code IV 31 Through IV 46 As 0

Type of Window/Windshield Glazing

31. WS 1 32. LF 0 33. RF 8 34. LR 0 35. RR 0
36. BL 8 37. Roof 0 38. Other 0

(0) No glazing contact and no damage, or no glazing

(1) AS-1 – Laminated

(2) AS-2 – Tempered

(3) AS-3 – Tempered-tinted

(4) AS-14 – Glass/Plastic

(8) Other (specify):

Add on tinting

(9) Unknown

Window Precrash Glazing Status

39. WS 1 40. LF 0 41. RF 3 42. LR 0 43. RR 0
44. BL 1 45. Roof 0 46. Other 0

(0) No glazing contact and no damage, or no glazing

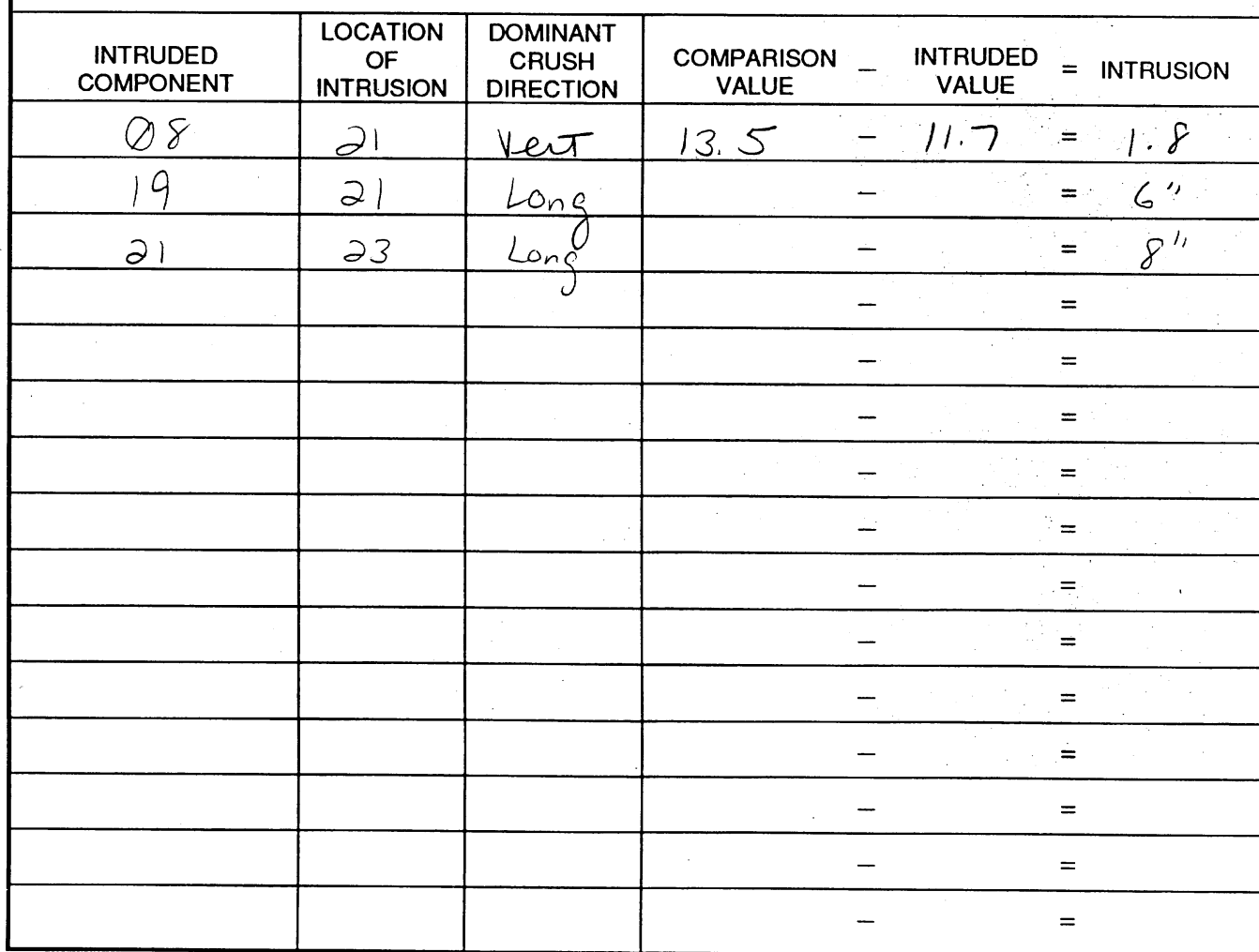
(1) Fixed

(2) Closed

(3) Partially opened

(4) Fully opened

(9) Unknown



OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV 47-IV 86 blank.

	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>23</u>	48. <u>19</u>	49. <u>3</u>	50. <u>2</u>
2nd	51. <u>21</u>	52. <u>19</u>	53. <u>3</u>	54. <u>2</u>
3rd	55. <u>21</u>	56. <u>08</u>	57. <u>1</u>	58. <u>1</u>
4th	59. _____	60. _____	61. _____	62. _____
5th	63. _____	64. _____	65. _____	66. _____
6th	67. _____	68. _____	69. _____	70. _____
7th	71. _____	72. _____	73. _____	74. _____
8th	75. _____	76. _____	77. _____	78. _____
9th	79. _____	80. _____	81. _____	82. _____
10th	83. _____	84. _____	85. _____	86. _____

LOCATION OF INTRUSION

Front Seat
 (11) Left
 (12) Middle
 (13) Right

Second Seat
 (21) Left
 (22) Middle
 (23) Right

Third Seat
 (31) Left
 (32) Middle
 (33) Right

Fourth Seat
 (41) Left
 (42) Middle
 (43) Right

(98) Other enclosed area (specify): _____

(99) Unknown

INTRUDING COMPONENT**Interior Components**

- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Door panel
- (11) Side panel/kickpanel
- (12) Roof (or convertible top)
- (13) Roof side rail
- (14) Windshield
- (15) Windshield header
- (16) Window frame
- (17) Floor pan
- (18) Backlight header
- (19) Front seat back
- (20) Second seat back
- (21) Third seat back
- (22) Fourth seat back
- (23) Fifth seat back
- (24) Seat cushion
- (25) Back panel or door surface
- (26) Other interior component (specify): _____

Exterior Components

- (30) Hood
- (31) Outside surface of vehicle (specify): _____
- (32) Other exterior object in the environment (specify): _____
- (33) Unknown exterior object
- (98) Intrusion of unlisted component(s) (specify): _____
- (99) Unknown

MAGNITUDE OF INTRUSION

- (1) ≥ 1 inch but < 3 inches
- (2) ≥ 3 inches but < 6 inches
- (3) ≥ 6 inches but < 12 inches
- (4) ≥ 12 inches but < 18 inches
- (5) ≥ 18 inches but < 24 inches
- (6) ≥ 24 inches
- (9) Unknown

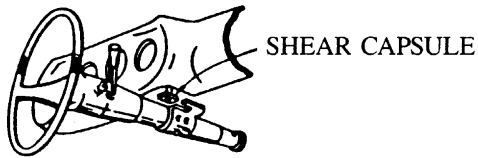
DOMINANT CRUSH DIRECTION

- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (9) Unknown

STEERING COLUMN WORKING DIAGRAMS

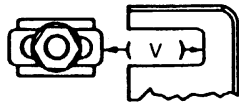
STEERING COLUMN COLLAPSE

Steering Column Shear Module Movement



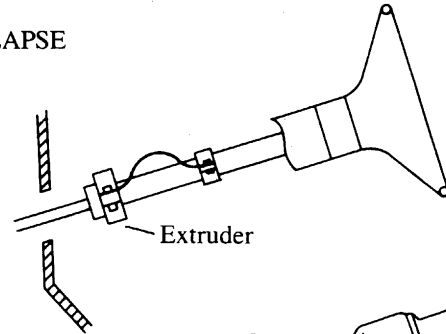
SHEAR CAPSULE

Left ____

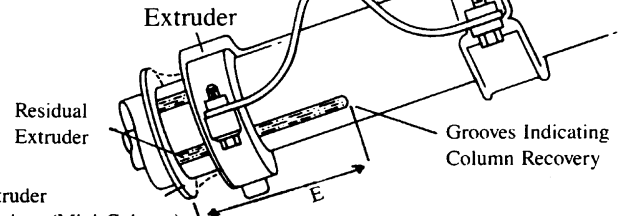


Right ____ V = ____"

Direction and Magnitude of Steering Column Movement



Extruder



Extruder

Residual Extruder

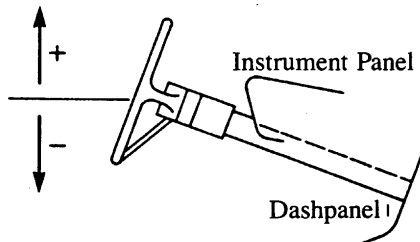
Grooves Indicating Column Recovery

Extruder Retainer (Mini Column) or Flared Tube (Mod Column)

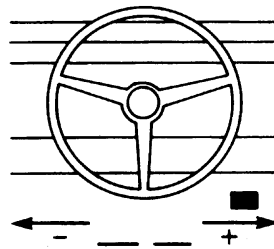
E = ____

STEERING COLUMN MOVEMENT

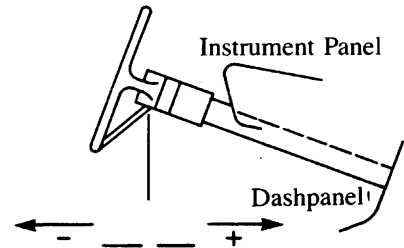
Vertical Movement



Lateral Movement



Longitudinal Movement



	COMPARISON VALUE	—	DAMAGED VALUE	=	MOVEMENT
VERTICAL		—		=	
LATERAL		—		=	
LONGITUDINAL		—		=	

STEERING RIM/SPOKE DEFORMATION

COMPARISON VALUE	—	DAMAGED VALUE	=	DEFORMATION
	—		=	
	—		=	

STEERING COLUMN**87. Steering Column Type** 2

- (1) Fixed column
 (2) Tilt column
 (3) Telescoping column
 (4) Tilt and telescoping column
 (8) Other column type (specify): _____

(9) Unknown

88. Steering Column Collapse Due to Occupant Loading 00

_____ Code actual measured movement to the nearest inch. See coding manual for measurement technique(s).

- (00) No movement, compression, or collapse
 (01-49) Actual measured value
 (50) 50 inches or greater

Estimated movement from observation

- (81) Less than 1 inch
 (82) ≥ 1 inch but < 2 inches
 (83) ≥ 2 inches but < 4 inches
 (84) ≥ 4 inches but < 6 inches
 (85) ≥ 6 inches but < 8 inches
 (86) Greater than or equal to 8 inches

- (97) Apparent movement, value undetermined or cannot be measured or estimated
 (98) Nonspecified type column
 (99) Unknown

Direction And Magnitude of Steering Column Movement**89. Vertical Movement** + 00**90. Lateral Movement** + 00**91. Longitudinal Movement** + 00

Code the actual measured movement to the nearest inch. See Coding Manual for measurement technique(s)

- (+ 00) No Steering column movement
 ($\pm 01 - \pm 49$) Actual measured value
 (± 50) 50 inches or greater

Estimated movement from observation

- (± 81) ≥ 1 inch but < 3 inches
 (± 82) ≥ 3 inches but < 6 inches
 (± 83) ≥ 6 inches but < 12 inches
 (± 84) ≥ 12 inches

- (___97) Apparent movement > 1 inch but cannot be measured or estimated
 (___99) Unknown

92. Steering Rim/Spoke Deformation 0

_____ Code actual measured deformation to the nearest inch.

- (0) No steering rim deformation
 (1-5) Actual measured value
 (6) 6 inches or more
 (8) Observed deformation cannot be measured
 (9) Unknown

93. Location of Steering Rim/Spoke Deformation 00

- (00) No steering rim deformation

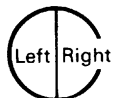
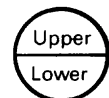
Quarter Sections

- (01) Section A
 (02) Section B
 (03) Section C
 (04) Section D



Half Sections

- (05) Upper half of rim/spoke
 (06) Lower half of rim/spoke
 (07) Left half of rim/spoke
 (08) Right half of rim/spoke



- (09) Complete steering wheel collapse
 (10) Undetermined location
 (99) Unknown

INSTRUMENT PANEL**94. Odometer Reading** 0 41,000

41,415 miles – Code mileage to the nearest 1,000 miles

- (000) No odometer
 (001) Less than 1,500 miles
 (300) 299,500 miles or more
 (999) Unknown

Source: _____

95. Instrument Panel Damage from Occupant Contact 1

- (0) No
 (1) Yes
 (9) Unknown

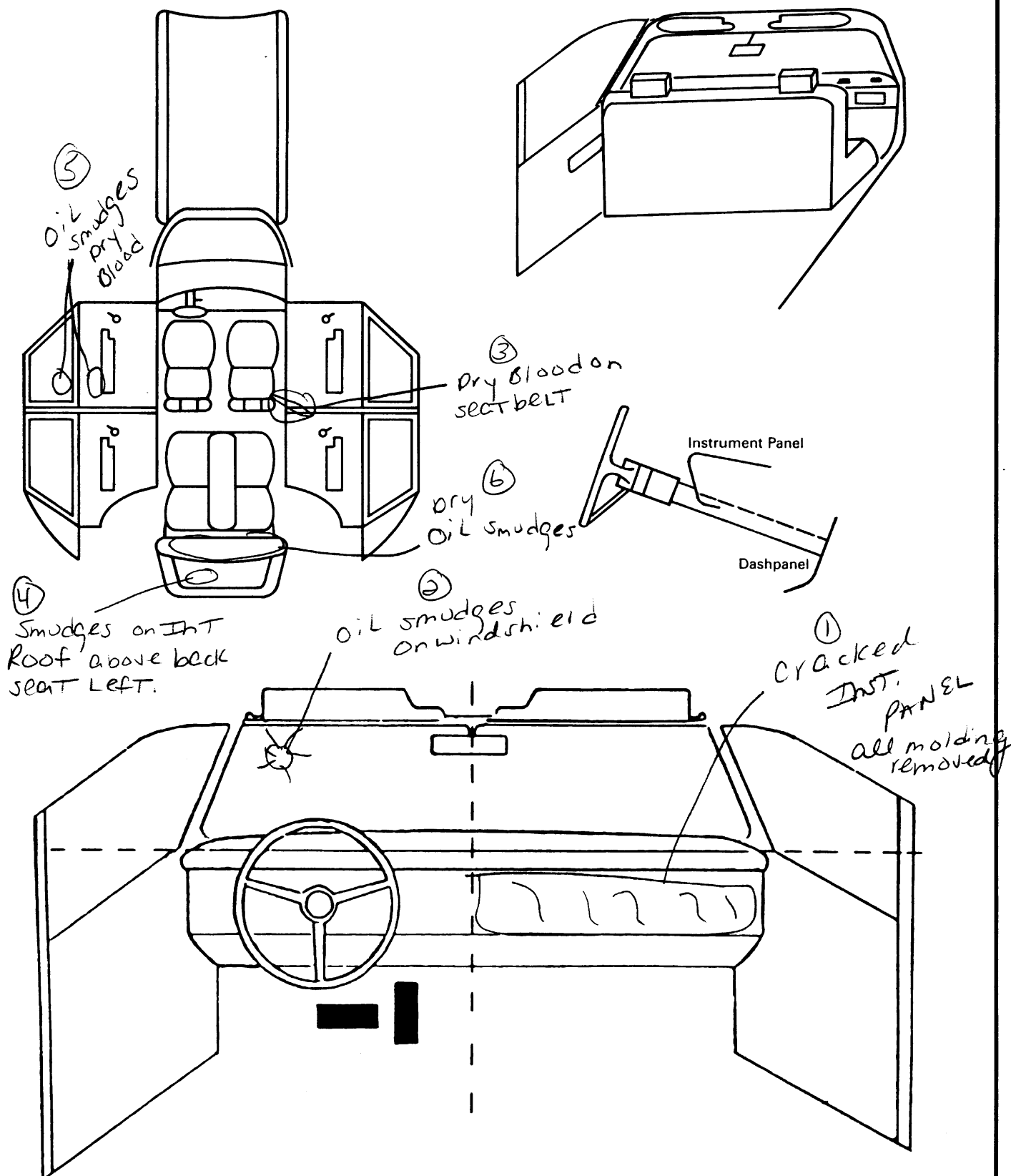
96. Knee Bolsters Deformed from Occupant Contact 8

- (0) No
 (1) Yes
 (8) Not present
 (9) Unknown

97. Did Glove Compartment Door Open During Collision(s) 1

- (0) No
 (1) Yes
 (8) Not present
 (9) Unknown

VEHICLE INTERIOR SKETCHES



POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A	11	02	Arm	cracked panel	1
B	01	01	Face	oil smudges	1
C	42	04	Forehead	Blood	2
D	54	03	Head	smudges	3
E	20	01	unk	Dry Blood, oil smudges	2
F	61	03	Head	Dry oil smudges	1
G					
H					
I					
J					
K					
L					
M					
N					

CODES FOR INTERIOR COMPONENTS

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, or mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects

- (48) Child safety seat (specify): _____

- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

CONFIDENCE LEVEL OF CONTACT POINT

- (1) Certain
- (2) Probable
- (3) Possible
- (4) Unknown

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attributes for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F I R S T	Availability			
	Function	N/A		
	Failure			

Automatic (Passive) Restraint System Availability

- (0) Not equipped/not available
- (1) Airbag
- (2) Airbag disconnected (specify): _____
- (3) Airbag not reinstalled
- (4) 2 point automatic belts
- (5) 3 point automatic belts
- (6) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Restraint Function

- (0) Not equipped/not available

Automatic Belt

- (1) Automatic belt in use
- (2) Automatic belt not in use
- (3) Automatic belt use unknown

Air Bag

- (4) Airbag deployed during accident
- (5) Airbag deployed inadvertently just prior to accident
- (6) Deployed, accident sequence undetermined
- (7) Nondeployed
- (8) Unknown if deployed
- (9) Unknown

Did Automatic (Passive) Restraint Fail

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify): _____
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data **for each seat position** in the vehicle. The attributes for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

If a child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous page.

		Left	Center	Right
FIRST	Availability	4	0	4
	Use	00	00	04
	Failure Modes	0	0	0
SECOND	Availability	3	0	3
	Use	99	00	99
	Failure Modes	0	0	0
THIRD	Availability	N		
	Use			
	Failure Modes			
OTHER	Availability	A		
	Use			
	Failure Modes			

Manual (Active) Belt System Availability

- (0) Not available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available – type unknown
- (8) Other belt (specify):

(9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperative (specify):

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used – type unknown

(08) Other belt used (specify):

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat – type unknown
- (18) Other belt used with child safety seat (specify):

(99) Unknown if belt used

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Manual belt failure(s) (encode all that apply above)
 - [A] Torn webbing (stretched webbing not included)
 - [B] Broken buckle or latchplate
 - [C] Upper anchorage separated
 - [D] Other anchorage separated (specify):

- [E] Broken retractor
- [F] Other manual belt failure (specify):

(9) Unknown

CHILD SAFETY SEAT FIELD ASSESSMENT

When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.

Occupant Number						
1. Type of Child Safety Seat						
2. Child Safety Seat Orientation		N/A				
3. Child Safety Seat Harness Usage						
4. Child Safety Seat Shield Usage						
5. Child Safety Seat Tether Usage						
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat					

1. Type of Child Safety Seat

- (0) No child safety seat
- (1) Infant seat
- (2) Toddler seat
- (3) Convertible seat
- (4) Booster seat
- (7) Other type child safety seat (specify):

- (8) Unknown child safety seat type
- (9) Unknown if child safety seat used

2. Child Safety Seat Orientation

- (00) No child safety seat
- Designed for Rear Facing for This Age/Weight
- (01) Rear facing
- (02) Forward facing
- (03) Other orientation (specify):

- (04) Unknown orientation
- Designed for Forward Facing for This Age/Weight
- (11) Rear facing
- (12) Forward facing
- (18) Other orientation (specify):

- (19) Unknown orientation

Unknown Design or Orientation for This Age/Weight, or Unknown Age/Weight

- (21) Rear facing
- (22) Forward facing
- (28) Other orientation (specify):

- (29) Unknown orientation

- (99) Unknown if child safety seat used

3. Child Safety Seat Harness Usage

4. Child Safety Seat Shield Usage

5. Child Safety Seat Tether Usage

Note: Options Below Are Used for Variables 3-5.

(00) No child safety seat

Not Designed with Harness/Shield/Tether

(01) After market harness/shield/tether added, not used

(02) After market harness/shield/tether used

(03) Child safety seat used, but no after market harness/shield/tether added

(09) Unknown if harness/shield/tether added or used

Designed with Harness/Shield/Tether

(11) Harness/shield/tether not used

(12) Harness/shield/tether used

(19) Unknown if harness/shield/tether used

Unknown if Designed with Harness/Shield/Tether

(21) Harness/shield/tether not used

(22) Harness/shield/tether used

(29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

6. Child Safety Seat Make/Model

(Specify make/model and occupant number)

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for **each seat position** in the vehicle. The attributes for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F I R S T	Head Restraint Type/Damage	4	0	3
	Seat Type	02	00	02
	Seat Performance	2(F)	00	2(F)
S E C O N D	Head Restraint Type/Damage	0	0	0
	Seat Type	03	03	03
	Seat Performance	2(0)F	9	2(0)F
T H I R D	Head Restraint Type/Damage	N		
	Seat Type			
	Seat Performance			
O T H E R	Head Restraint Type/Damage	A		
	Seat Type			
	Seat Performance			

Head Restraint Type/Damage by Occupant at This Occupant Position

- (0) No head restraints
- (1) Integral – no damage
- (2) Integral – damaged during accident
- (3) Adjustable – no damage
- (4) Adjustable – damaged during accident
- (5) Add-on – no damage
- (6) Add-on – damaged during accident
- (8) Other (specify): _____
- (9) Unknown

Seat Type (This Occupant Position)

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., van type)
- (09) Other seat type (specify): _____
- (99) Unknown

Seat Performance (This Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat performance failure(s)
(Encode all that apply)
- [A] Seat adjusters failed
- [B] Seat back folding locks failed
- [C] Seat tracks failed
- [D] Seat anchors failed
- [E] Deformed by impact of passenger from rear
- [F] Deformed by impact of passenger from front
- [G] Deformed by own inertial forces
- [H] Deformed by passenger compartment intrusion
(specify): _____

[I] Other (specify): SEAT popped OUT
from impact

(9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E. UNUSUAL OCCUPANT CONTACT PATTERN)

N/A

EJECTION/ENTRAPMENT DATA

Complete the following if the researcher has any indications that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.

EJECTION No [] Yes [☒]

Describe indications of ejection and body parts involved in partial ejection(s):

Occupant Number	1	3	4			
Ejection	1	1	1			
Ejection Area	3	6	6			
Ejection Medium	4	3	3			
Medium Status	1	2	2			

Ejection

- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

Ejection Area

- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear

(7) Roof

- (8) Other area (e.g., back of pickup, etc.) (specify):

- (9) Unknown

Ejection Medium

- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify):

Part. opened (R Front)

(5) Integral structure

- (8) Other medium (specify):

- (9) Unknown

Medium Status (Immediately Prior to Impact)

- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

ENTRAPMENT No [☒] Yes []

Describe entrapment mechanism: _____

Component(s): _____

(Note in vehicle interior diagram)



U.S. Department of Transportation

National Highway Traffic Safety
Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 41 3. Vehicle Number 01
2. Case Number—Stratum 052C 4. Occupant Number 01

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than twenty injuries have been documented, encode the balance on the Occupant Injury Supplement.

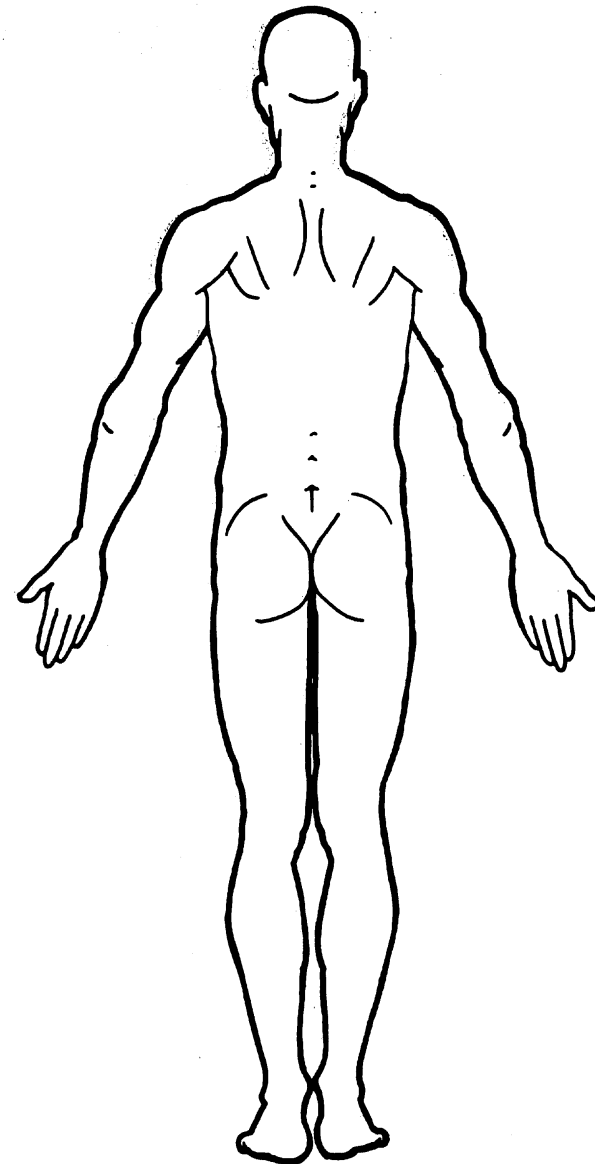
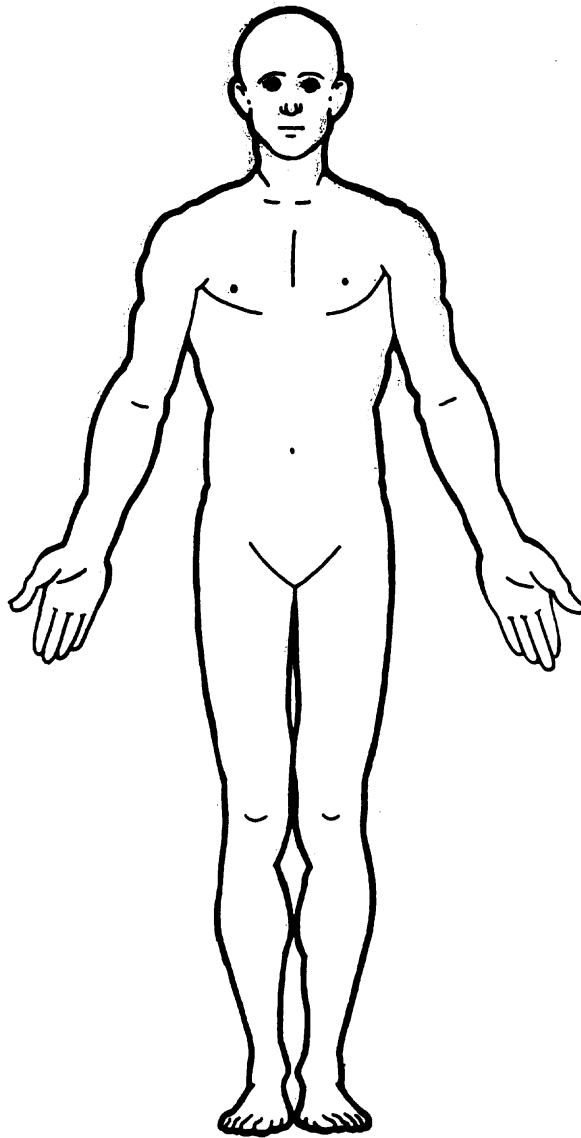
Source of Injury Data	O.I.C. — A.I.S.						Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity					
1st 5.	<u>7</u>	6. <u>C</u>	7. <u>U</u>	8. <u>P</u>	9. <u>P</u>	10. <u>3</u>	11. <u>85</u>	12. <u>2</u>	13. <u>1</u>	14. <u>00</u>
2nd 15.	<u>7</u>	16. <u>C</u>	17. <u>U</u>	18. <u>F</u>	19. <u>S</u>	20. <u>2</u>	21. <u>85</u>	22. <u>2</u>	23. <u>1</u>	24. <u>00</u>
3rd 25.	<u>7</u>	26. <u>P</u>	27. <u>U</u>	28. <u>F</u>	29. <u>S</u>	30. <u>2</u>	31. <u>85</u>	32. <u>2</u>	33. <u>1</u>	34. <u>00</u>
4th 35.	—	36. —	37. —	38. —	39. —	40. —	41. —	42. —	43. —	44. —
5th 45.	—	46. —	47. —	48. —	49. —	50. —	51. —	52. —	53. —	54. —
6th 55.	—	56. —	57. —	58. —	59. —	60. —	61. —	62. —	63. —	64. —
7th 65.	—	66. —	67. —	68. —	69. —	70. —	71. —	72. —	73. —	74. —
8th 75.	—	76. —	77. —	78. —	79. —	80. —	81. —	82. —	83. —	84. —
9th 85.	—	86. —	87. —	88. —	89. —	90. —	91. —	92. —	93. —	94. —
10th 95.	—	96. —	97. —	98. —	99. —	100. —	101. —	102. —	103. —	104. —
11th 105.	—	106. —	107. —	108. —	109. —	110. —	111. —	112. —	113. —	114. —
12th 115.	—	116. —	117. —	118. —	119. —	120. —	121. —	122. —	123. —	124. —
13th 125.	—	126. —	127. —	128. —	129. —	130. —	131. —	132. —	133. —	134. —
14th 135.	—	136. —	137. —	138. —	139. —	140. —	141. —	142. —	143. —	144. —
15th 145.	—	146. —	147. —	148. —	149. —	150. —	151. —	152. —	153. —	154. —
16th 155.	—	156. —	157. —	158. —	159. —	160. —	161. —	162. —	163. —	164. —
17th 165.	—	166. —	167. —	168. —	169. —	170. —	171. —	172. —	173. —	174. —
18th 175.	—	176. —	177. —	178. —	179. —	180. —	181. —	182. —	183. —	184. —
19th 185.	—	186. —	187. —	188. —	189. —	190. —	191. —	192. —	193. —	194. —
20th 195.	—	196. —	197. —	198. —	199. —	200. —	201. —	202. —	203. —	204. —

OCCUPANT INJURY DATA SUPPLEMENT

Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
21st	—	—	—	—	—	— — —	—	—	— — —
22nd	—	—	—	—	—	— — —	—	—	— — —
23rd	—	—	—	—	—	— — —	—	—	— — —
24th	—	—	—	—	—	— — —	—	—	— — —
25th	—	—	—	—	—	— — —	—	—	— — —
26th	—	—	—	—	—	— — —	—	—	— — —
27th	—	—	—	—	—	— — —	—	—	— — —
28th	—	—	—	—	—	— — —	—	—	— — —
29th	—	—	—	—	—	— — —	—	—	— — —
30th	—	—	—	—	—	— — —	—	—	— — —
31st	—	—	—	—	—	— — —	—	—	— — —
32nd	—	—	—	—	—	— — —	—	—	— — —
33rd	—	—	—	—	—	— — —	—	—	— — —
34th	—	—	—	—	—	— — —	—	—	— — —
35th	—	—	—	—	—	— — —	—	—	— — —
36th	—	—	—	—	—	— — —	—	—	— — —
37th	—	—	—	—	—	— — —	—	—	— — —
38th	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): General rail
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

(W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

(G) Detachment, separation

(D) Dislocation

(F) Fracture

(Z) Fracture and dislocation

(U) Injured, unknown lesion

(L) Laceration

(O) Other

(P) Perforation, puncture

(R) Rupture

(S) Sprain

(T) Strain

(E) Total severance, transection

System/Organ

(W) All systems in region

(A) Arteries-veins

(B) Brain

(D) Digestive

(E) Ears

(O) Eye

(H) Heart

(U) Injured, unknown system

(I) Integumentary

(J) Joints

(K) Kidneys

(L) Liver

(M) Muscles

(N) Nervous system

(P) Pulmonary-lungs

(R) Respiratory

(S) Skeletal

(C) Spinal cord

(Q) Spleen

(T) Thyroid, other endocrine gland

(G) Urogenital

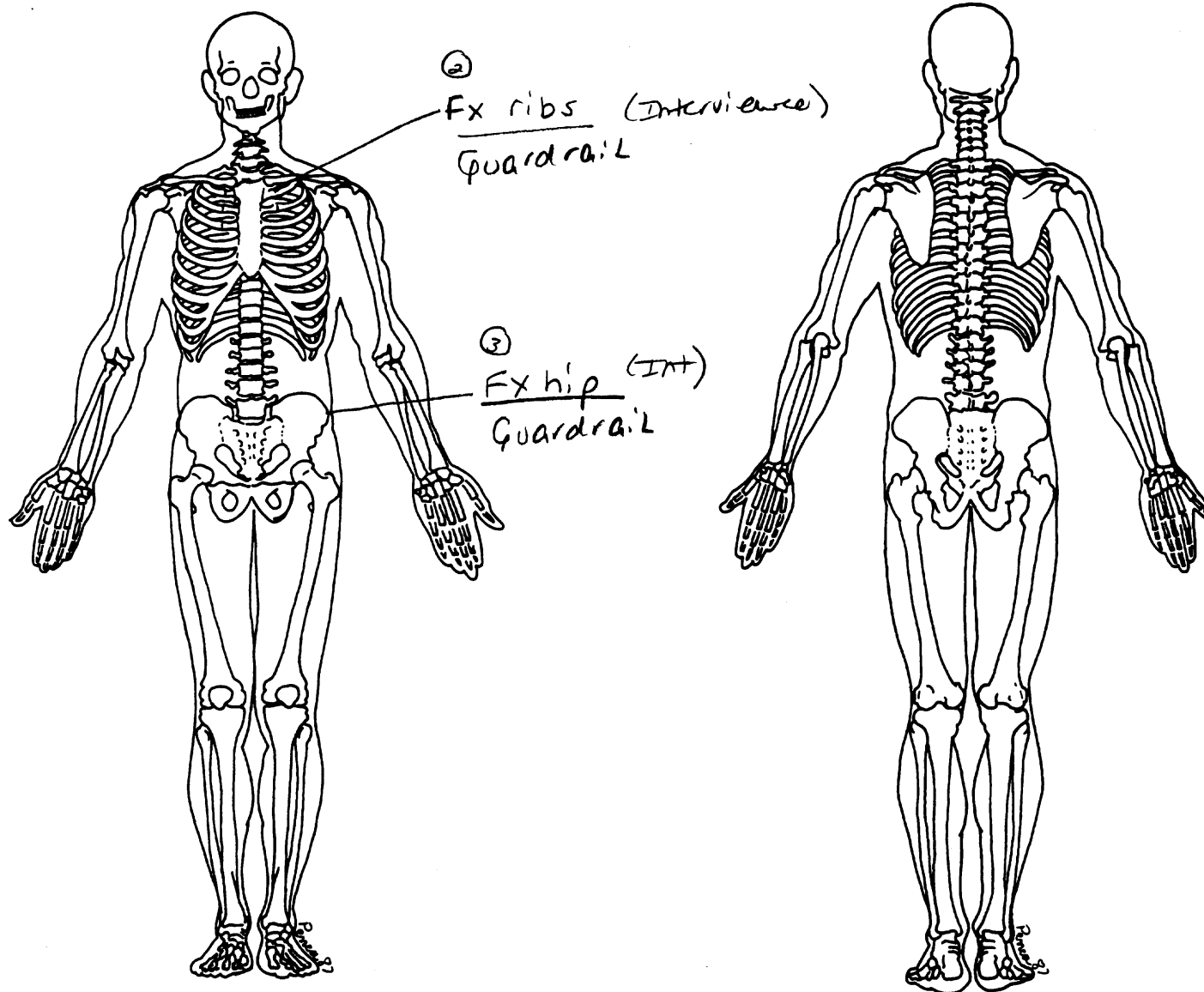
(V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

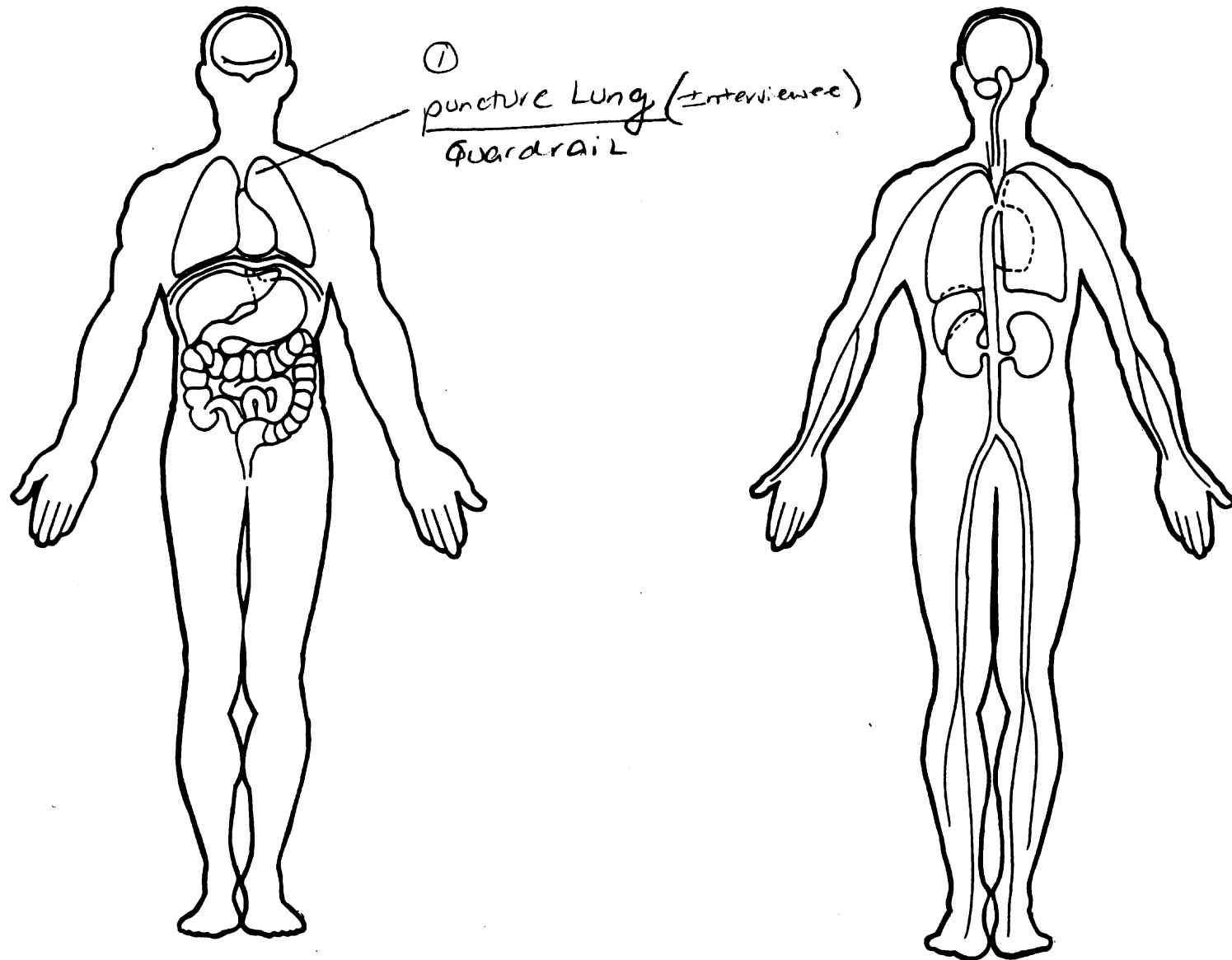
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location*, *Lesion*, *Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





U.S. Department of Transportation
National Highway Traffic Safety
Administration

UPDATE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

41

2. Case Number — Stratum

052C

3. Vehicle Number

01

4. Occupant Number

01

Driver or Occupant Name: _____

Address: _____

Other Information: _____

RECEIVED 1988

(Sanitize this section prior to Update submission.)

INJURY DATA CODED ON INITIAL SUBMISSION

O.I.C. — A.I.S.										Injury Source Confidence Level				Direct/Indirect Injury		Occupant Area Intrusion No.	
Source of Injury Data	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source	Injury Source
1st	5. 7	6. C	7. U	8. P	9. P	10. 3	11. 85	12. 2	13. 1	14. 60							
2nd	15. 7	16. C	17. U	18. F	19. S	20. 2	21. 85	22. 2	23. 1	24. 00							
3rd	25. 7	26. P	27. U	28. F	29. S	30. 2	31. 85	32. 2	33. 1	34. 00							
4th	35. —	36. —	37. —	38. —	39. —	40. —	41. —	42. —	43. —	44. —							
5th	45. —	46. —	47. —	48. —	49. —	50. —	51. —	52. —	53. —	54. —							
6th	55. —	56. —	57. —	58. —	59. —	60. —	61. —	62. —	63. —	64. —							
7th	65. —	66. —	67. —	68. —	69. —	70. —	71. —	72. —	73. —	74. —							
8th	75. —	76. —	77. —	78. —	79. —	80. —	81. —	82. —	83. —	84. —							
9th	85. —	86. —	87. —	88. —	89. —	90. —	91. —	92. —	93. —	94. —							
10th	95. —	96. —	97. —	98. —	99. —	100. —	101. —	102. —	103. —	104. —							

NOTE: If necessary, keep copy of original OI form and submit as part of update.

UPDATED CASE INFORMATION

	INITIAL SUBMISSION	FINAL		INITIAL SUBMISSION	FINAL
GV12. Alcohol Test Results for Driver	96	96	OA35. Treatment — Mortality	3	3
OA05. Occupant's Age	18	18	OA36. Type of Medical Facility (for Initial Treatment)	2	2
OA06. Occupant's Sex	1	1	OA37. Hospital Stay	99	59
OA07. Occupant's Height	69	69	OA38. Working Days Lost	97	97
OA08. Occupant's Weight	170	170	OA39. Time to Death	00	00
OA17. Manual (Active) Belt System Availability	4	4	OA40. 1st Medically Reported Cause of Death	00	00
OA18. Manual (Active) Belt System Use	00	00	OA41. 2nd Medically Reported Cause of Death	00	00
OA21. Automatic (Passive) Restraint System Availability	0	0	OA42. 3rd Medically Reported Cause of Death	00	00
OA22. Automatic (Passive) Restraint Function	0	0	OA43. Number of Recorded Injuries for This Occupant	03	06

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the unofficial and official sources prior to initial case submission **and from subsequently** acquired medical data. Remember not to double count an injury just because it was identified from two different sources.

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>2</u>	6. <u>T</u>	7. <u>U</u>	8. <u>E</u>	9. <u>S</u>	10. <u>3</u>	11. <u>85</u>	12. <u>2</u>	13. <u>1</u>	14. <u>ØØ</u>
2nd	15. <u>2</u>	16. <u>V</u>	17. <u>U</u>	18. <u>L</u>	19. <u>I</u>	20. <u>1</u>	21. <u>97</u>	22. <u>9</u>	23. <u>7</u>	24. <u>ØØ</u>
3rd	25. <u>2</u>	26. <u>E</u>	27. <u>U</u>	28. <u>L</u>	29. <u>I</u>	30. <u>1</u>	31. <u>97</u>	32. <u>9</u>	33. <u>7</u>	34. <u>ØØ</u>
4th	35. <u>2</u>	36. <u>C</u>	37. <u>L</u>	38. <u>E</u>	39. <u>S</u>	40. <u>4</u>	41. <u>97</u>	42. <u>9</u>	43. <u>7</u>	44. <u>ØØ</u>
5th	45. <u>2</u>	46. <u>C</u>	47. <u>R</u>	48. <u>E</u>	49. <u>S</u>	50. <u>4</u>	51. <u>97</u>	52. <u>9</u>	53. <u>7</u>	54. <u>ØØ</u>
6th	55. <u>2</u>	56. <u>P</u>	57. <u>U</u>	58. <u>E</u>	59. <u>S</u>	60. <u>2</u>	61. <u>97</u>	62. <u>9</u>	63. <u>7</u>	64. <u>ØØ</u>
7th	65. ____	66. ____	67. ____	68. ____	69. ____	70. ____	71. ____	72. ____	73. ____	74. ____
8th	75. ____	76. ____	77. ____	78. ____	79. ____	80. ____	81. ____	82. ____	83. ____	84. ____
9th	85. ____	86. ____	87. ____	88. ____	89. ____	90. ____	91. ____	92. ____	93. ____	94. ____
10th	95. ____	96. ____	97. ____	98. ____	99. ____	100. ____	101. ____	102. ____	103. ____	104. ____
11th	105. ____	106. ____	107. ____	108. ____	109. ____	110. ____	111. ____	112. ____	113. ____	114. ____
12th	115. ____	116. ____	117. ____	118. ____	119. ____	120. ____	121. ____	122. ____	123. ____	124. ____
13th	125. ____	126. ____	127. ____	128. ____	129. ____	130. ____	131. ____	132. ____	133. ____	134. ____
14th	135. ____	136. ____	137. ____	138. ____	139. ____	140. ____	141. ____	142. ____	143. ____	144. ____
15th	145. ____	146. ____	147. ____	148. ____	149. ____	150. ____	151. ____	152. ____	153. ____	154. ____
16th	155. ____	156. ____	157. ____	158. ____	159. ____	160. ____	161. ____	162. ____	163. ____	164. ____
17th	165. ____	166. ____	167. ____	168. ____	169. ____	170. ____	171. ____	172. ____	173. ____	174. ____
18th	175. ____	176. ____	177. ____	178. ____	179. ____	180. ____	181. ____	182. ____	183. ____	184. ____
19th	185. ____	186. ____	187. ____	188. ____	189. ____	190. ____	191. ____	192. ____	193. ____	194. ____
20th	195. ____	196. ____	197. ____	198. ____	199. ____	200. ____	201. ____	202. ____	203. ____	204. ____

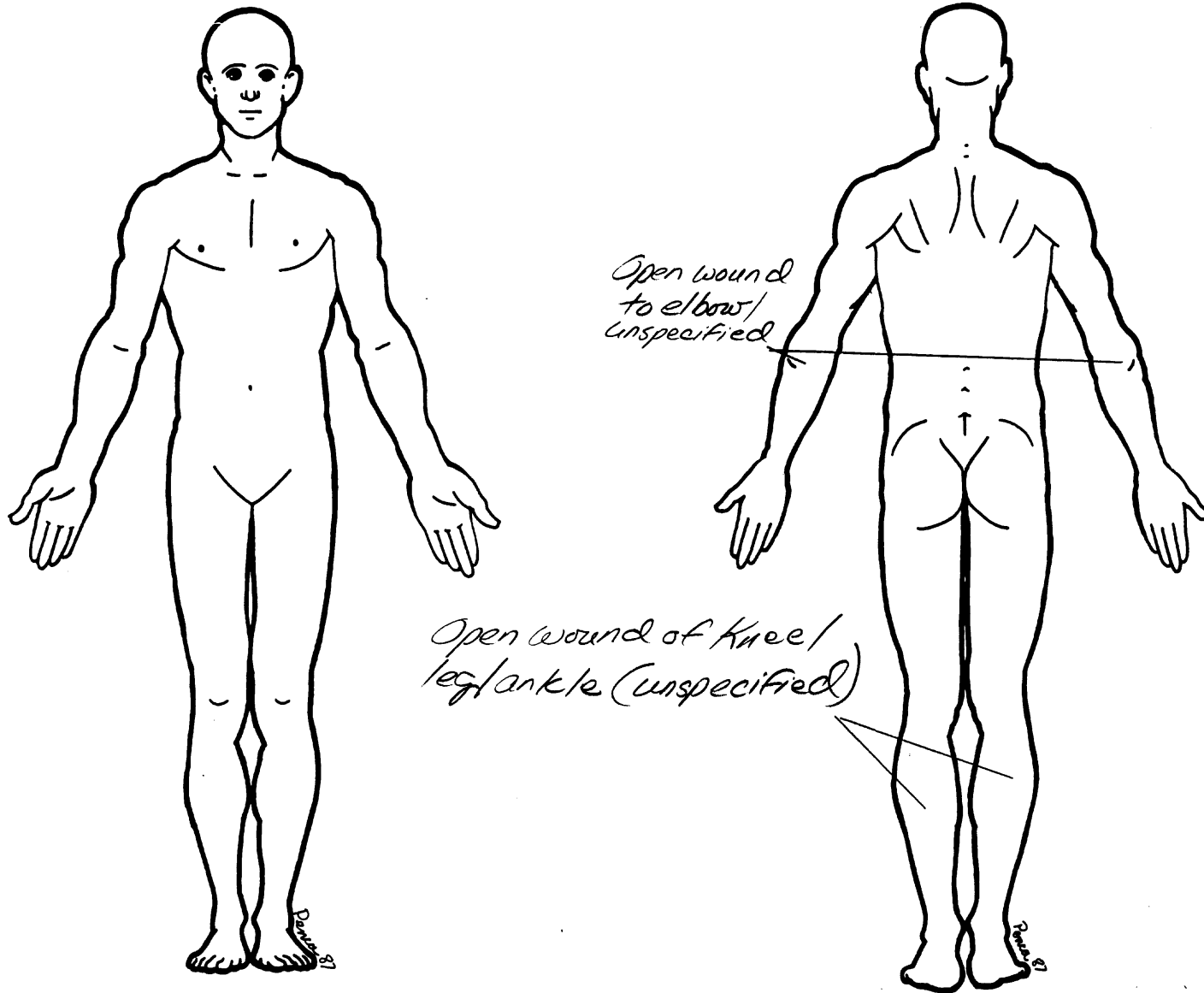
If greater than 20 injuries, code additional on Occupant Injury Data Supplement.

OCCUPANT INJURY DATA SUPPLEMENT

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
21st	—	—	—	—	—	—	— — —	—	—	— — —
22nd	—	—	—	—	—	—	— — —	—	—	— — —
23rd	—	—	—	—	—	—	— — —	—	—	— — —
24th	—	—	—	—	—	—	— — —	—	—	— — —
25th	—	—	—	—	—	—	— — —	—	—	— — —
26th	—	—	—	—	—	—	— — —	—	—	— — —
27th	—	—	—	—	—	—	— — —	—	—	— — —
28th	—	—	—	—	—	—	— — —	—	—	— — —
29th	—	—	—	—	—	—	— — —	—	—	— — —
30th	—	—	—	—	—	—	— — —	—	—	— — —
31st	—	—	—	—	—	—	— — —	—	—	— — —
32nd	—	—	—	—	—	—	— — —	—	—	— — —
33rd	—	—	—	—	—	—	— — —	—	—	— — —
34th	—	—	—	—	—	—	— — —	—	—	— — —
35th	—	—	—	—	—	—	— — —	—	—	— — —
36th	—	—	—	—	—	—	— — —	—	—	— — —
37th	—	—	—	—	—	—	— — —	—	—	— — —
38th	—	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

- (W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation
- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

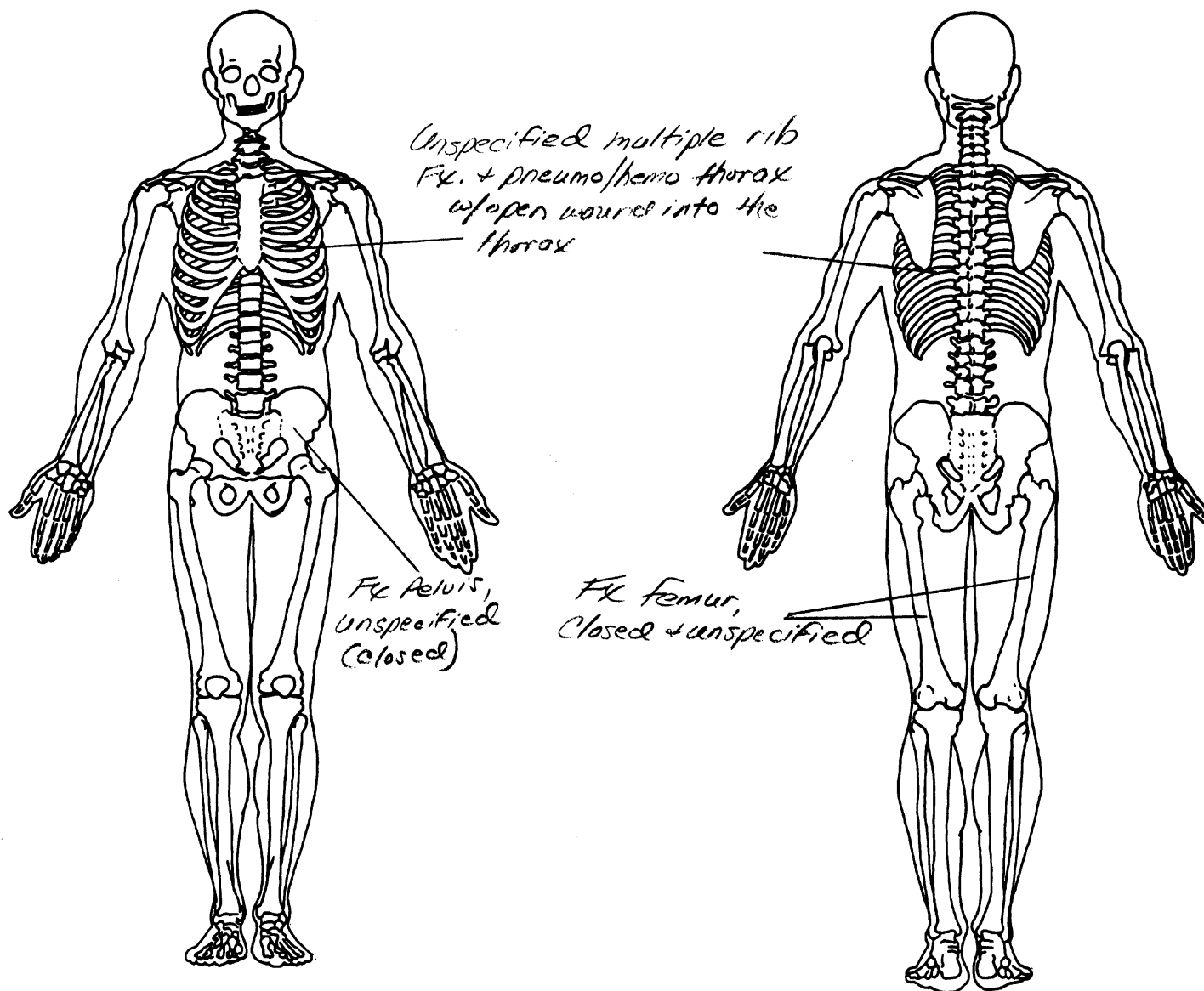
- (I) Integumentary
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

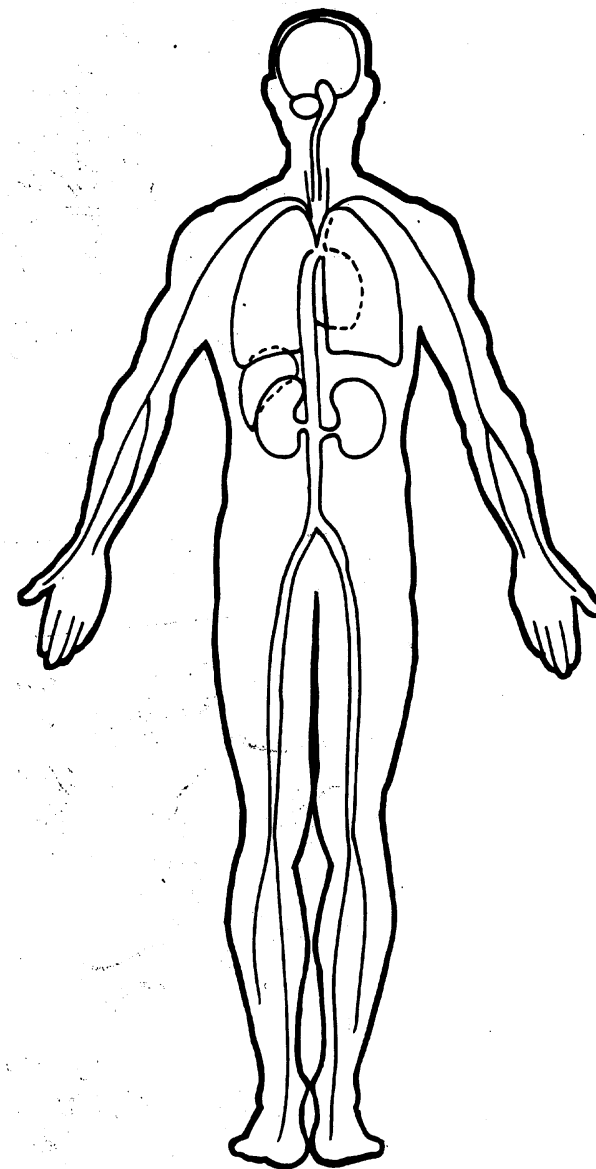
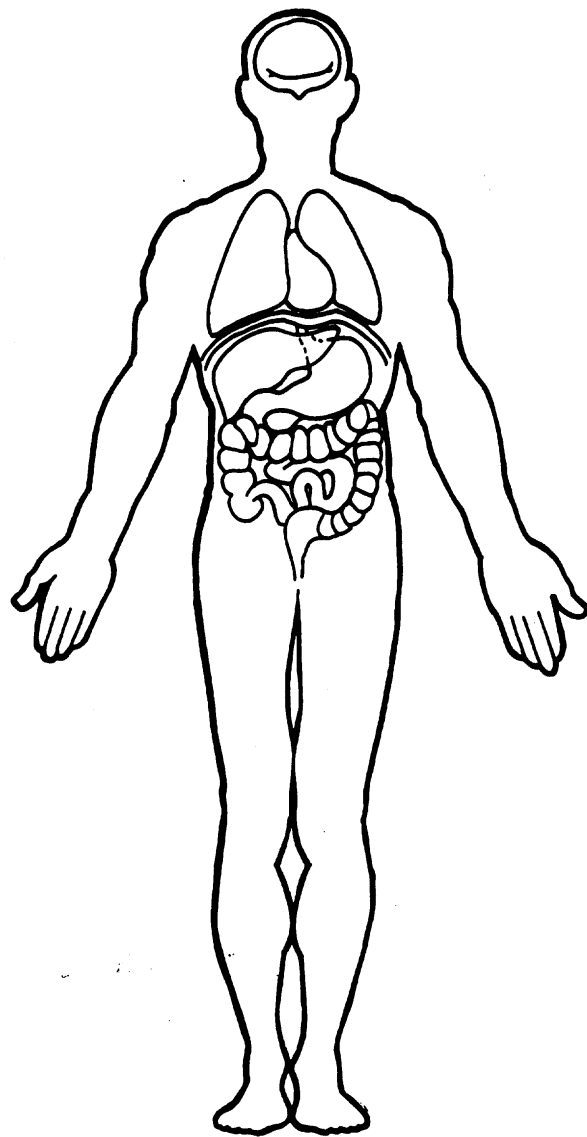
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OCCUPANT INJURY FORM

1. Primary Sampling Unit Number 41 3. Vehicle Number 01
2. Case Number—Stratum 052C 4. Occupant Number 02

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than twenty injuries have been documented, encode the balance on the Occupant Injury Supplement.

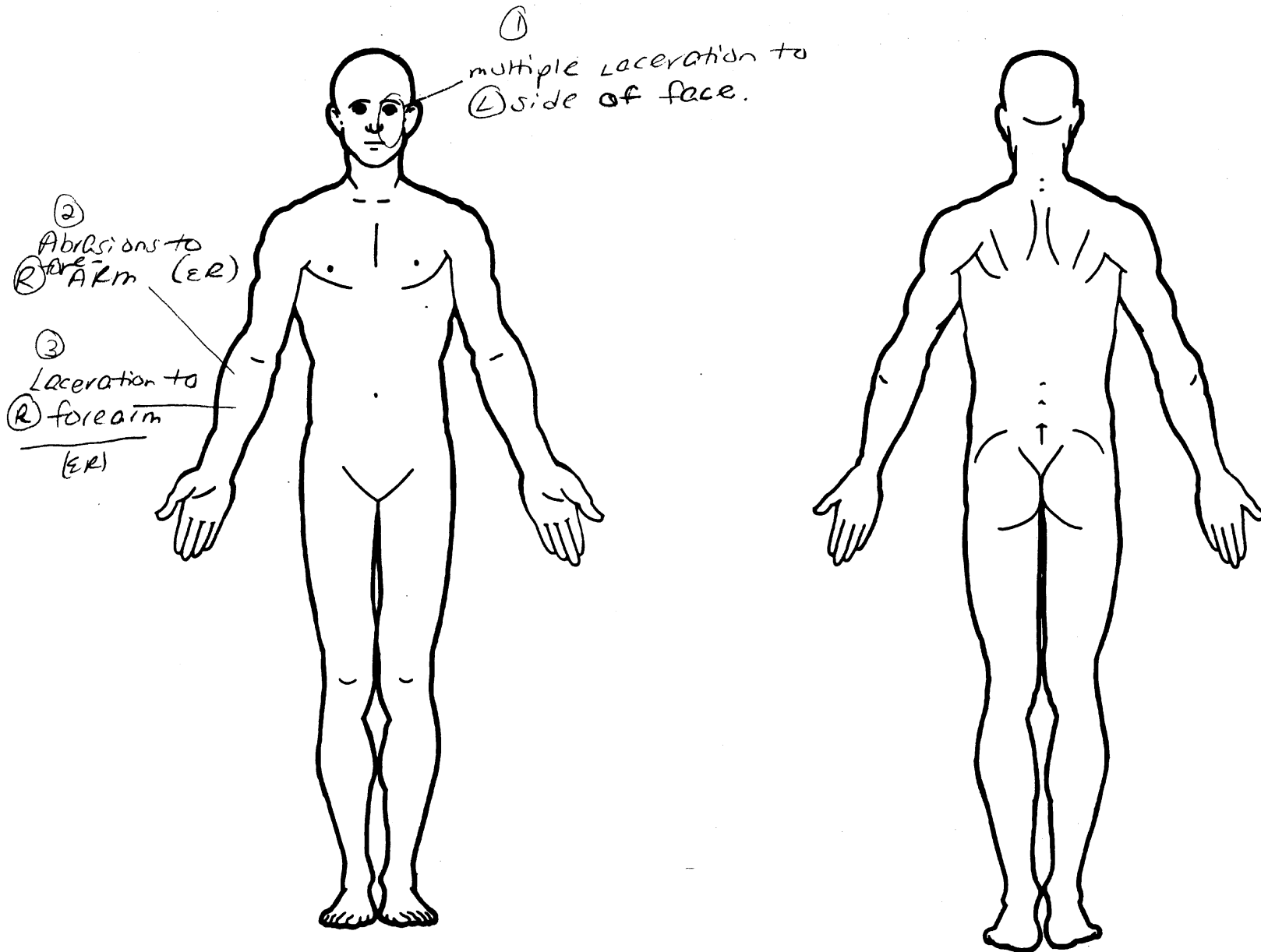
	Source of Injury Data	O.I.C. — A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>3</u>	6. <u>F</u>	7. <u>L</u>	8. <u>L</u>	9. <u>I</u>	10. <u>1</u>	11. <u>01</u>	12. <u>2</u>	13. <u>1</u>	14. <u>00</u>
2nd	15. <u>3</u>	16. <u>R</u>	17. <u>R</u>	18. <u>A</u>	19. <u>I</u>	20. <u>1</u>	21. <u>11</u>	22. <u>2</u>	23. <u>1</u>	24. <u>00</u>
3rd	25. <u>3</u>	26. <u>R</u>	27. <u>R</u>	28. <u>L</u>	29. <u>I</u>	30. <u>1</u>	31. <u>11</u>	32. <u>2</u>	33. <u>1</u>	34. <u>00</u>
4th	35. <u> </u>	36. <u> </u>	37. <u> </u>	38. <u> </u>	39. <u> </u>	40. <u> </u>	41. <u> </u>	42. <u> </u>	43. <u> </u>	44. <u> </u>
5th	45. <u> </u>	46. <u> </u>	47. <u> </u>	48. <u> </u>	49. <u> </u>	50. <u> </u>	51. <u> </u>	52. <u> </u>	53. <u> </u>	54. <u> </u>
6th	55. <u> </u>	56. <u> </u>	57. <u> </u>	58. <u> </u>	59. <u> </u>	60. <u> </u>	61. <u> </u>	62. <u> </u>	63. <u> </u>	64. <u> </u>
7th	65. <u> </u>	66. <u> </u>	67. <u> </u>	68. <u> </u>	69. <u> </u>	70. <u> </u>	71. <u> </u>	72. <u> </u>	73. <u> </u>	74. <u> </u>
8th	75. <u> </u>	76. <u> </u>	77. <u> </u>	78. <u> </u>	79. <u> </u>	80. <u> </u>	81. <u> </u>	82. <u> </u>	83. <u> </u>	84. <u> </u>
9th	85. <u> </u>	86. <u> </u>	87. <u> </u>	88. <u> </u>	89. <u> </u>	90. <u> </u>	91. <u> </u>	92. <u> </u>	93. <u> </u>	94. <u> </u>
10th	95. <u> </u>	96. <u> </u>	97. <u> </u>	98. <u> </u>	99. <u> </u>	100. <u> </u>	101. <u> </u>	102. <u> </u>	103. <u> </u>	104. <u> </u>
11th	105. <u> </u>	106. <u> </u>	107. <u> </u>	108. <u> </u>	109. <u> </u>	110. <u> </u>	111. <u> </u>	112. <u> </u>	113. <u> </u>	114. <u> </u>
12th	115. <u> </u>	116. <u> </u>	117. <u> </u>	118. <u> </u>	119. <u> </u>	120. <u> </u>	121. <u> </u>	122. <u> </u>	123. <u> </u>	124. <u> </u>
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14th	135. <u> </u>	136. <u> </u>	137. <u> </u>	138. <u> </u>	139. <u> </u>	140. <u> </u>	141. <u> </u>	142. <u> </u>	143. <u> </u>	144. <u> </u>
15th	145. <u> </u>	146. <u> </u>	147. <u> </u>	148. <u> </u>	149. <u> </u>	150. <u> </u>	151. <u> </u>	152. <u> </u>	153. <u> </u>	154. <u> </u>
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OCCUPANT INJURY DATA SUPPLEMENT

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
21st	—	—	—	—	—	—	— — —	—	—	— — —
22nd	—	—	—	—	—	—	— — —	—	—	— — —
23rd	—	—	—	—	—	—	— — —	—	—	— — —
24th	—	—	—	—	—	—	— — —	—	—	— — —
25th	—	—	—	—	—	—	— — —	—	—	— — —
26th	—	—	—	—	—	—	— — —	—	—	— — —
27th	—	—	—	—	—	—	— — —	—	—	— — —
28th	—	—	—	—	—	—	— — —	—	—	— — —
29th	—	—	—	—	—	—	— — —	—	—	— — —
30th	—	—	—	—	—	—	— — —	—	—	— — —
31st	—	—	—	—	—	—	— — —	—	—	— — —
32nd	—	—	—	—	—	—	— — —	—	—	— — —
33rd	—	—	—	—	—	—	— — —	—	—	— — —
34th	—	—	—	—	—	—	— — —	—	—	— — —
35th	—	—	—	—	—	—	— — —	—	—	— — —
36th	—	—	—	—	—	—	— — —	—	—	— — —
37th	—	—	—	—	—	—	— — —	—	—	— — —
38th	—	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____

- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____

- (47) Interior loose objects
- (48) Child safety seat (specify): _____

- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

- (W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation

- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

- (I) Integumentary

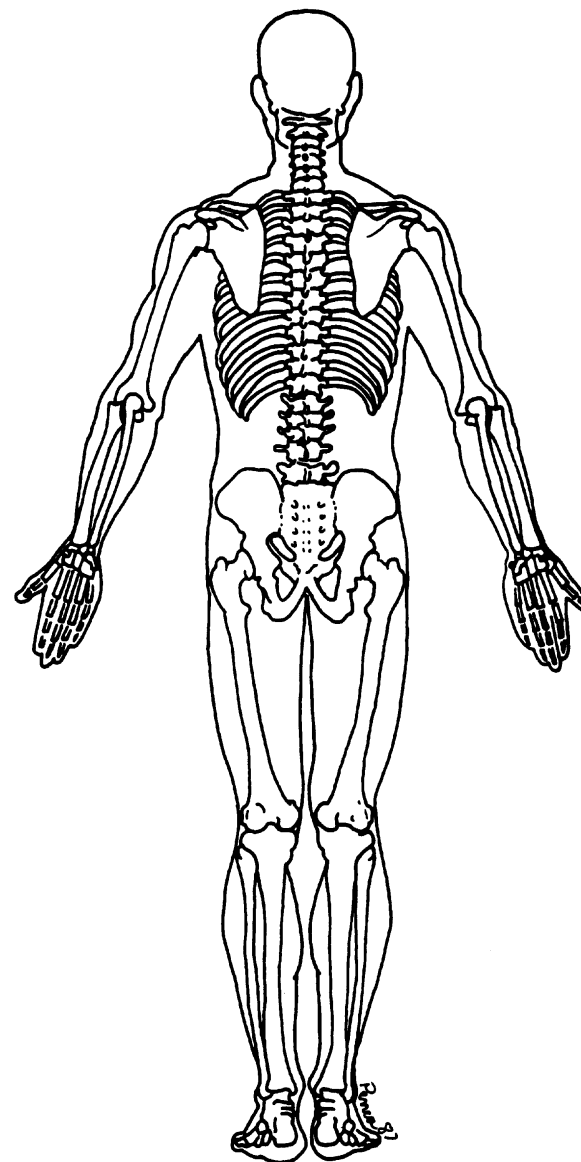
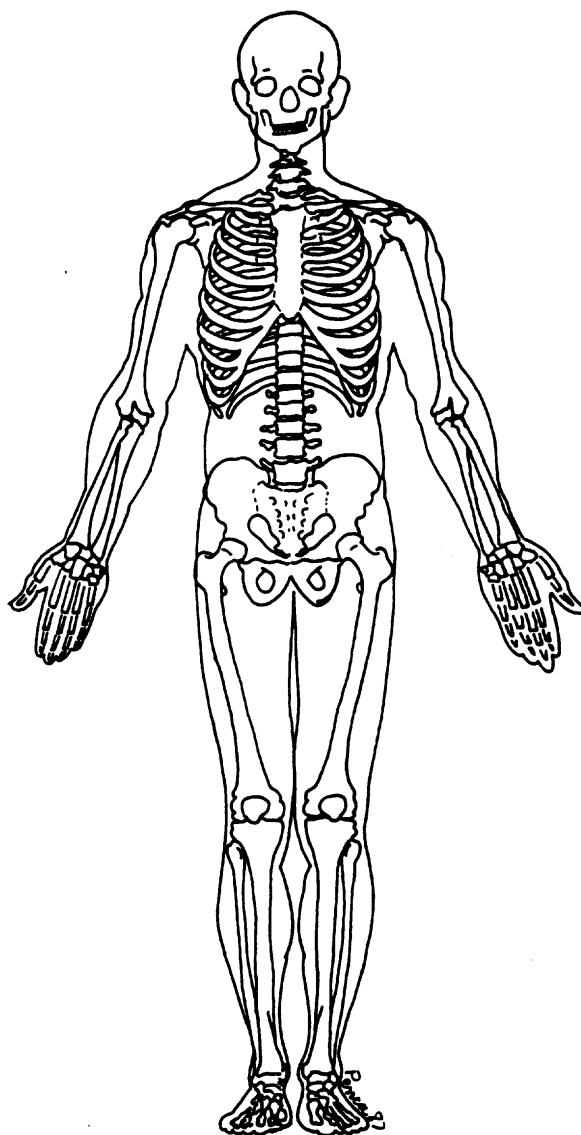
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

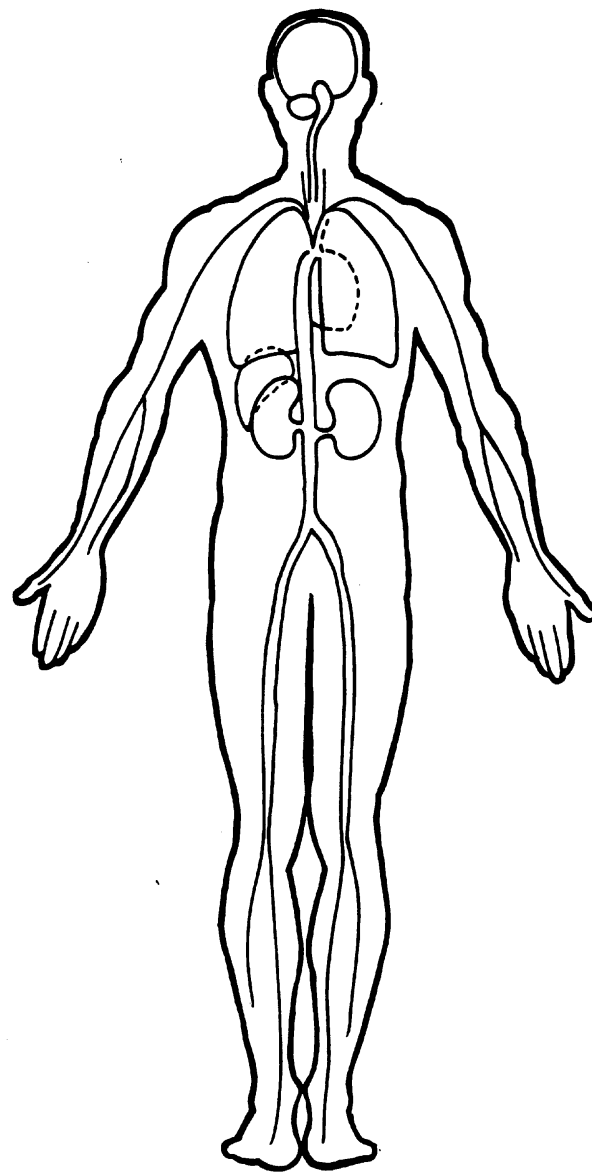
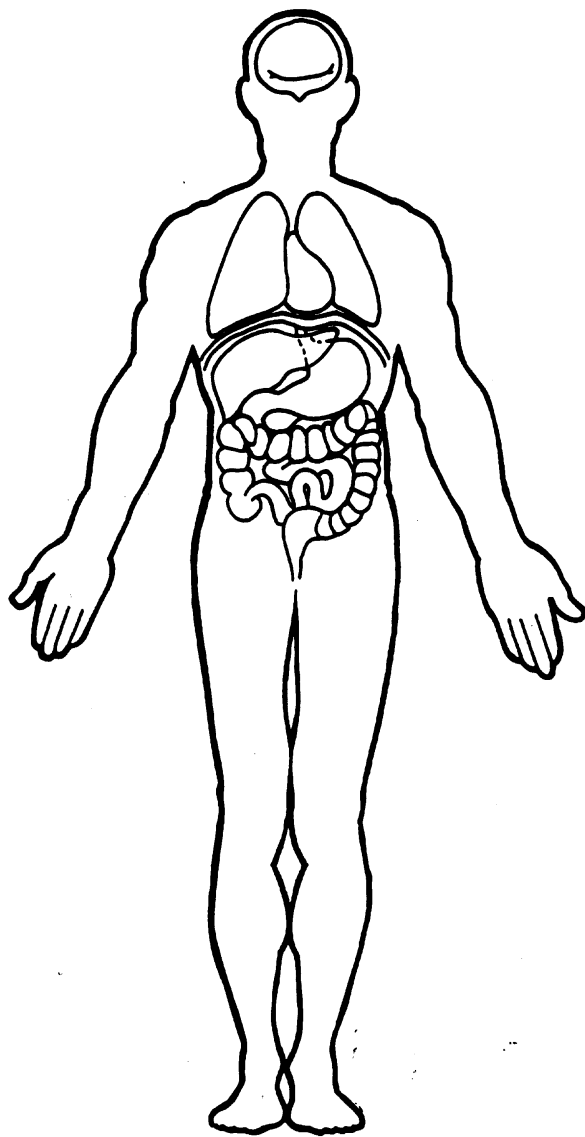
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location*, *Lesion*, *Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





U.S. Department of Transportation

National Highway Traffic Safety
Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 41 3. Vehicle Number 01
2. Case Number – Stratum 052C 4. Occupant Number 03

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than twenty injuries have been documented, encode the balance on the Occupant Injury Supplement.

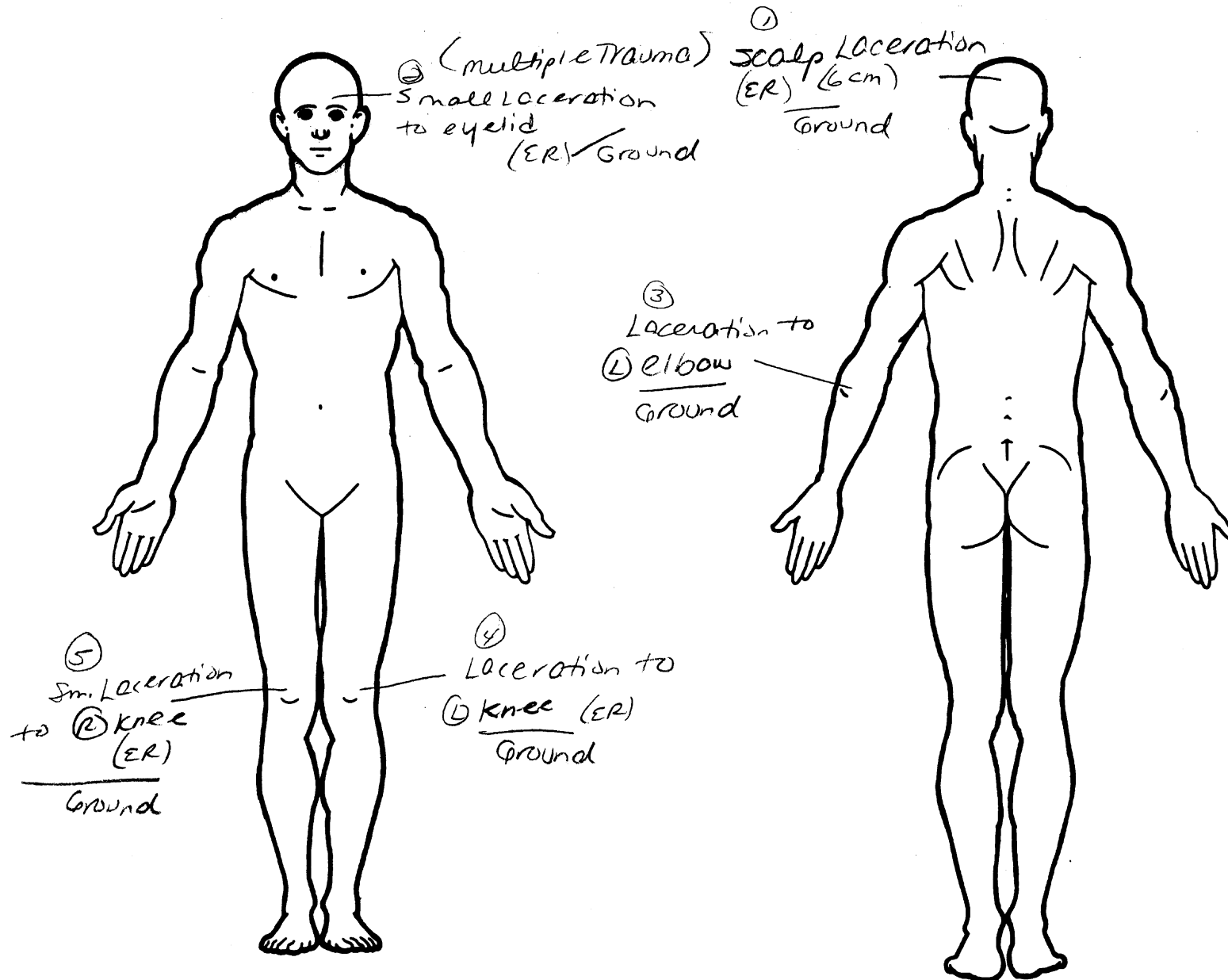
Source of Injury Data	O.I.C. – A.I.S.						Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity					
1st 5. <u>3</u>	6. <u>H</u>	7. <u>U</u>	8. <u>L</u>	9. <u>I</u>	10. <u>2</u>	11. <u>84</u>	12. <u>1</u>	13. <u>1</u>	14. <u>00</u>	
2nd 15. <u>3</u>	16. <u>F</u>	17. <u>U</u>	18. <u>L</u>	19. <u>O</u>	20. <u>1</u>	21. <u>84</u>	22. <u>1</u>	23. <u>1</u>	24. <u>00</u>	
3rd 25. <u>3</u>	26. <u>E</u>	27. <u>L</u>	28. <u>L</u>	29. <u>I</u>	30. <u>1</u>	31. <u>84</u>	32. <u>1</u>	33. <u>1</u>	34. <u>00</u>	
4th 35. <u>3</u>	36. <u>K</u>	37. <u>L</u>	38. <u>L</u>	39. <u>I</u>	40. <u>1</u>	41. <u>84</u>	42. <u>1</u>	43. <u>1</u>	44. <u>00</u>	
5th 45. <u>3</u>	46. <u>K</u>	47. <u>R</u>	48. <u>L</u>	49. <u>I</u>	50. <u>1</u>	51. <u>84</u>	52. <u>1</u>	53. <u>1</u>	54. <u>00</u>	
6th 55. <u> </u>	56. <u> </u>	57. <u> </u>	58. <u> </u>	59. <u> </u>	60. <u> </u>	61. <u> </u>	62. <u> </u>	63. <u> </u>	64. <u> </u>	
7th 65. <u> </u>	66. <u> </u>	67. <u> </u>	68. <u> </u>	69. <u> </u>	70. <u> </u>	71. <u> </u>	72. <u> </u>	73. <u> </u>	74. <u> </u>	
8th 75. <u> </u>	76. <u> </u>	77. <u> </u>	78. <u> </u>	79. <u> </u>	80. <u> </u>	81. <u> </u>	82. <u> </u>	83. <u> </u>	84. <u> </u>	
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OCCUPANT INJURY DATA SUPPLEMENT

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
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38th	—	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



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INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____

- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____

- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

(W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation
- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

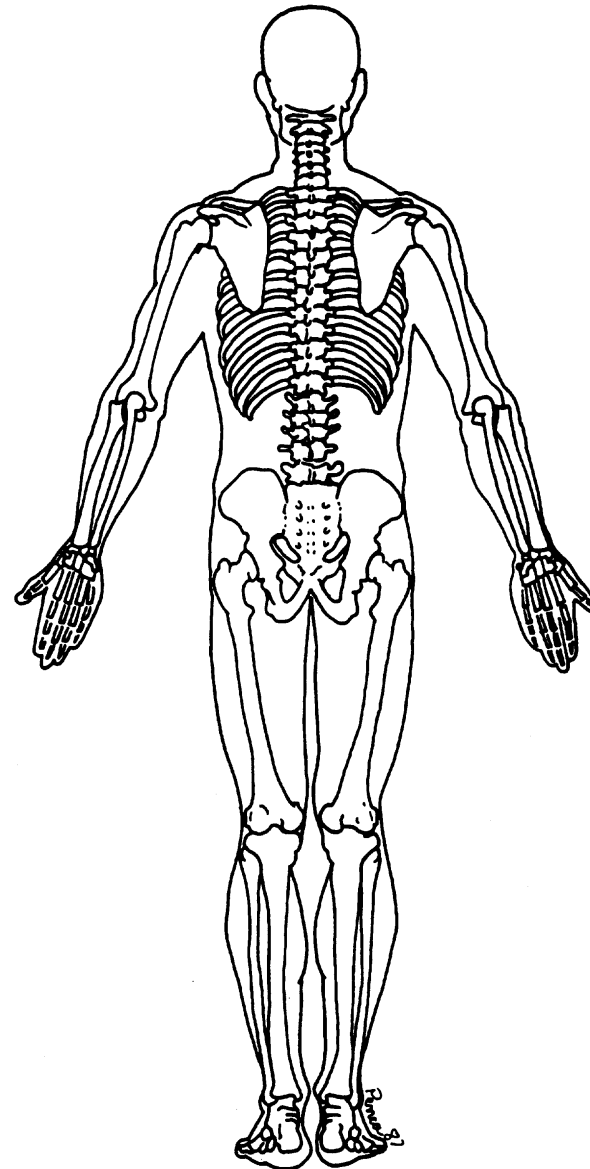
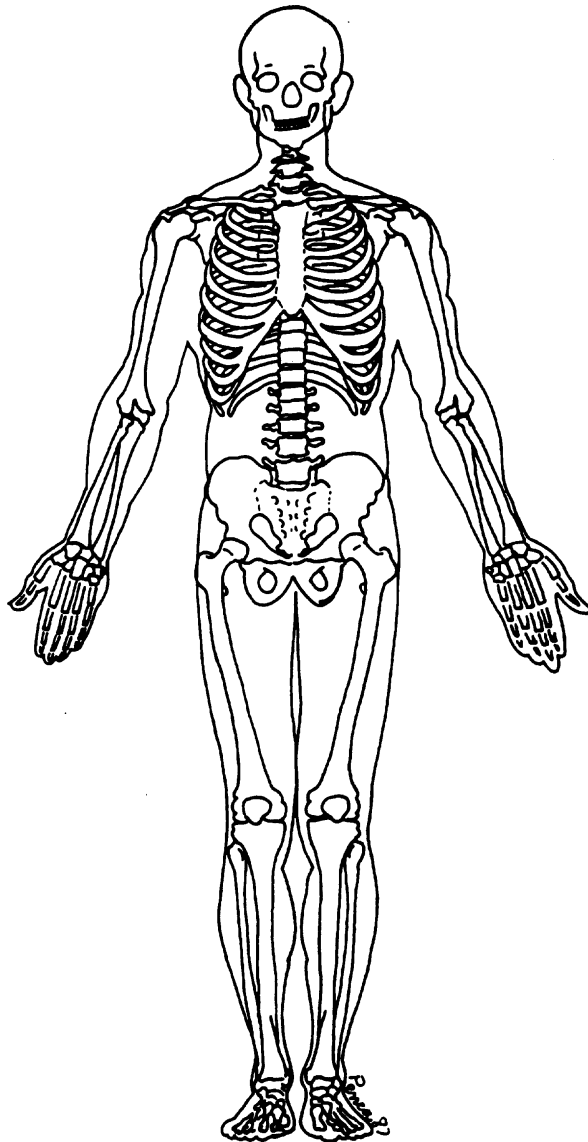
- (#) Integumentary
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

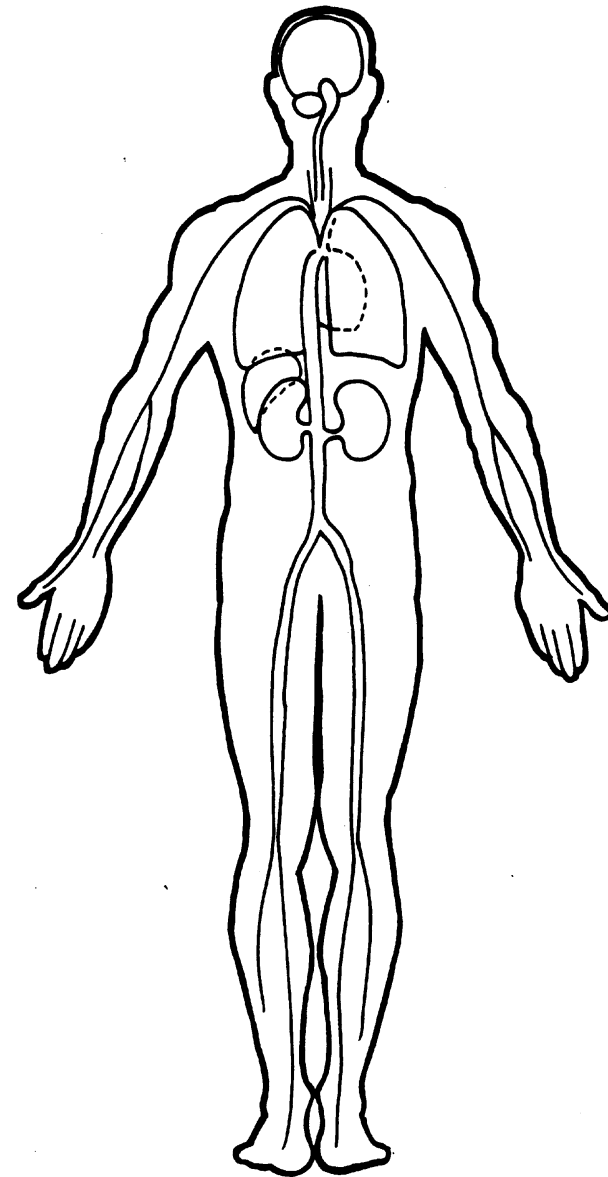
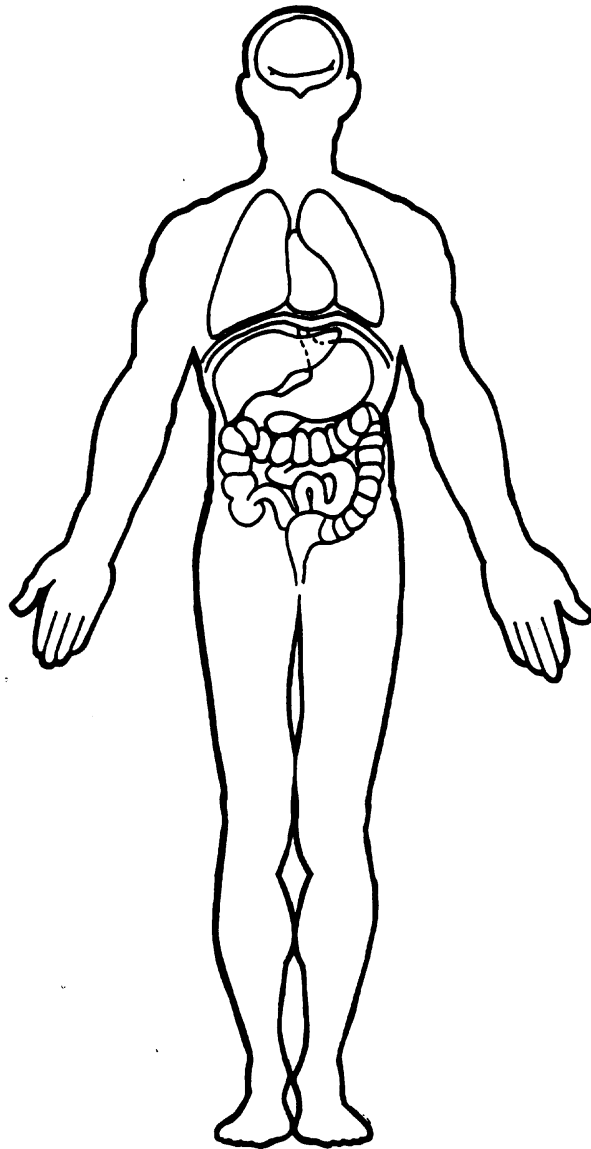
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location*, *Lesion*, *Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





U.S. Department of Transportation

National Highway Traffic Safety
Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 41 3. Vehicle Number 01
2. Case Number - Stratum 052C 4. Occupant Number 04

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than twenty injuries have been documented, encode the balance on the Occupant Injury Supplement.

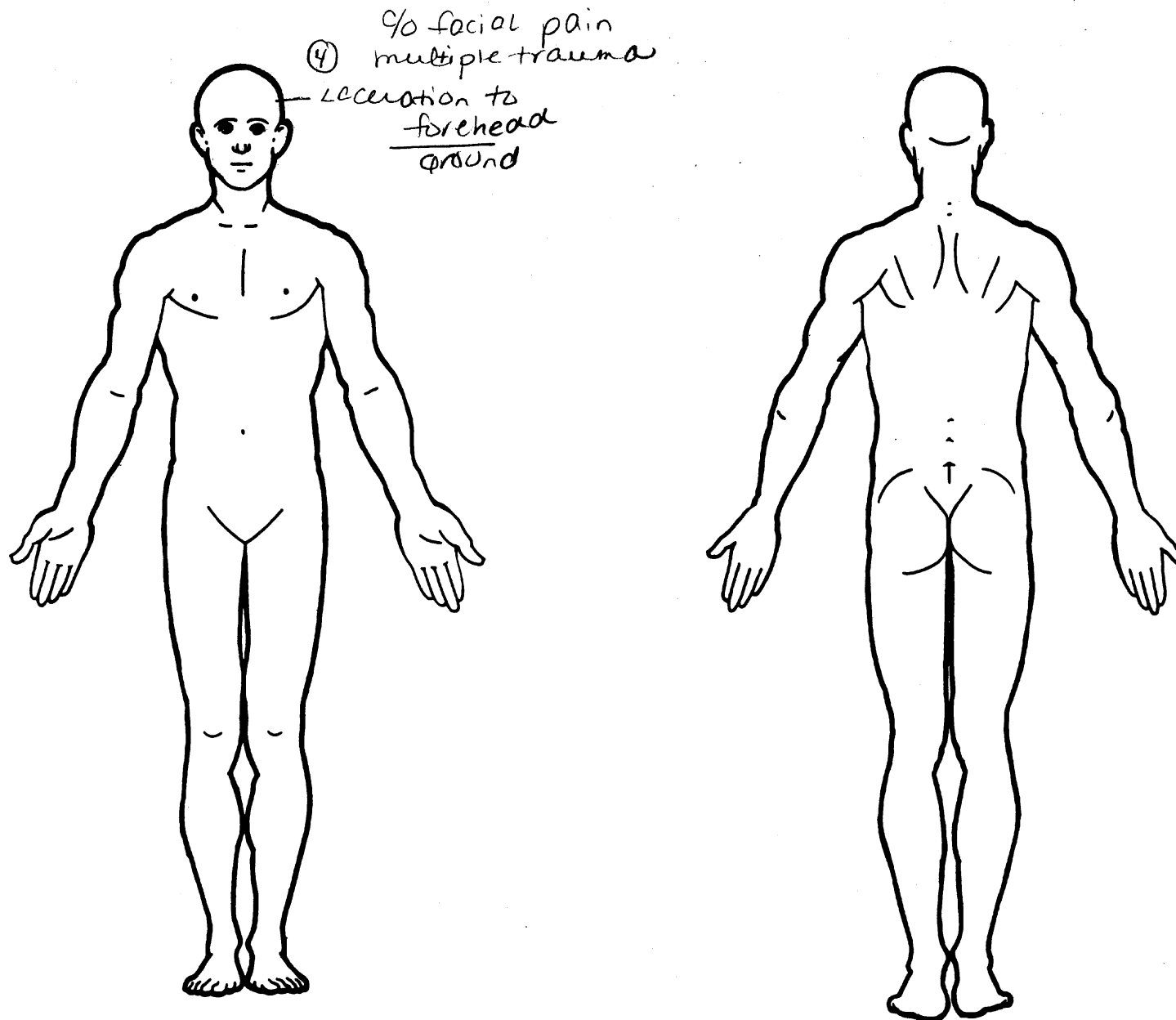
Source of Injury Data	O.I.C. - A.I.S.						Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity					
1st	5. <u>3</u>	6. <u>A</u>	7. <u>R</u>	8. <u>F</u>	9. <u>S</u>	10. <u>3</u>	11. <u>84</u>	12. <u>1</u>	13. <u>1</u>	14. <u>00</u>
2nd	15. <u>3</u>	16. <u>I</u>	17. <u>R</u>	18. <u>F</u>	19. <u>S</u>	20. <u>3</u>	21. <u>84</u>	22. <u>1</u>	23. <u>1</u>	24. <u>00</u>
3rd	25. <u>3</u>	26. <u>R</u>	27. <u>R</u>	28. <u>F</u>	29. <u>S</u>	30. <u>2</u>	31. <u>84</u>	32. <u>1</u>	33. <u>1</u>	34. <u>00</u>
4th	35. <u>7</u>	36. <u>F</u>	37. <u>S</u>	38. <u>L</u>	39. <u>I</u>	40. <u>1</u>	41. <u>84</u>	42. <u>1</u>	43. <u>1</u>	44. <u>00</u>
5th	45. <u> </u>	46. <u> </u>	47. <u> </u>	48. <u> </u>	49. <u> </u>	50. <u> </u>	51. <u> </u>	52. <u> </u>	53. <u> </u>	54. <u> </u>
6th	55. <u> </u>	56. <u> </u>	57. <u> </u>	58. <u> </u>	59. <u> </u>	60. <u> </u>	61. <u> </u>	62. <u> </u>	63. <u> </u>	64. <u> </u>
7th	65. <u> </u>	66. <u> </u>	67. <u> </u>	68. <u> </u>	69. <u> </u>	70. <u> </u>	71. <u> </u>	72. <u> </u>	73. <u> </u>	74. <u> </u>
8th	75. <u> </u>	76. <u> </u>	77. <u> </u>	78. <u> </u>	79. <u> </u>	80. <u> </u>	81. <u> </u>	82. <u> </u>	83. <u> </u>	84. <u> </u>
9th	85. <u> </u>	86. <u> </u>	87. <u> </u>	88. <u> </u>	89. <u> </u>	90. <u> </u>	91. <u> </u>	92. <u> </u>	93. <u> </u>	94. <u> </u>
10th	95. <u> </u>	96. <u> </u>	97. <u> </u>	98. <u> </u>	99. <u> </u>	100. <u> </u>	101. <u> </u>	102. <u> </u>	103. <u> </u>	104. <u> </u>
11th	105. <u> </u>	106. <u> </u>	107. <u> </u>	108. <u> </u>	109. <u> </u>	110. <u> </u>	111. <u> </u>	112. <u> </u>	113. <u> </u>	114. <u> </u>
12th	115. <u> </u>	116. <u> </u>	117. <u> </u>	118. <u> </u>	119. <u> </u>	120. <u> </u>	121. <u> </u>	122. <u> </u>	123. <u> </u>	124. <u> </u>
13th	125. <u> </u>	126. <u> </u>	127. <u> </u>	128. <u> </u>	129. <u> </u>	130. <u> </u>	131. <u> </u>	132. <u> </u>	133. <u> </u>	134. <u> </u>
14th	135. <u> </u>	136. <u> </u>	137. <u> </u>	138. <u> </u>	139. <u> </u>	140. <u> </u>	141. <u> </u>	142. <u> </u>	143. <u> </u>	144. <u> </u>
15th	145. <u> </u>	146. <u> </u>	147. <u> </u>	148. <u> </u>	149. <u> </u>	150. <u> </u>	151. <u> </u>	152. <u> </u>	153. <u> </u>	154. <u> </u>
16th	155. <u> </u>	156. <u> </u>	157. <u> </u>	158. <u> </u>	159. <u> </u>	160. <u> </u>	161. <u> </u>	162. <u> </u>	163. <u> </u>	164. <u> </u>
17th	165. <u> </u>	166. <u> </u>	167. <u> </u>	168. <u> </u>	169. <u> </u>	170. <u> </u>	171. <u> </u>	172. <u> </u>	173. <u> </u>	174. <u> </u>
18th	175. <u> </u>	176. <u> </u>	177. <u> </u>	178. <u> </u>	179. <u> </u>	180. <u> </u>	181. <u> </u>	182. <u> </u>	183. <u> </u>	184. <u> </u>
19th	185. <u> </u>	186. <u> </u>	187. <u> </u>	188. <u> </u>	189. <u> </u>	190. <u> </u>	191. <u> </u>	192. <u> </u>	193. <u> </u>	194. <u> </u>
20th	195. <u> </u>	196. <u> </u>	197. <u> </u>	198. <u> </u>	199. <u> </u>	200. <u> </u>	201. <u> </u>	202. <u> </u>	203. <u> </u>	204. <u> </u>

OCCUPANT INJURY DATA SUPPLEMENT

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
21st	—	—	—	—	—	—	— — —	—	—	— — —
22nd	—	—	—	—	—	—	— — —	—	—	— — —
23rd	—	—	—	—	—	—	— — —	—	—	— — —
24th	—	—	—	—	—	—	— — —	—	—	— — —
25th	—	—	—	—	—	—	— — —	—	—	— — —
26th	—	—	—	—	—	—	— — —	—	—	— — —
27th	—	—	—	—	—	—	— — —	—	—	— — —
28th	—	—	—	—	—	—	— — —	—	—	— — —
29th	—	—	—	—	—	—	— — —	—	—	— — —
30th	—	—	—	—	—	—	— — —	—	—	— — —
31st	—	—	—	—	—	—	— — —	—	—	— — —
32nd	—	—	—	—	—	—	— — —	—	—	— — —
33rd	—	—	—	—	—	—	— — —	—	—	— — —
34th	—	—	—	—	—	—	— — —	—	—	— — —
35th	—	—	—	—	—	—	— — —	—	—	— — —
36th	—	—	—	—	—	—	— — —	—	—	— — —
37th	—	—	—	—	—	—	— — —	—	—	— — —
38th	—	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA—SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____

- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

- (W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation

- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

- (I) Integumentary

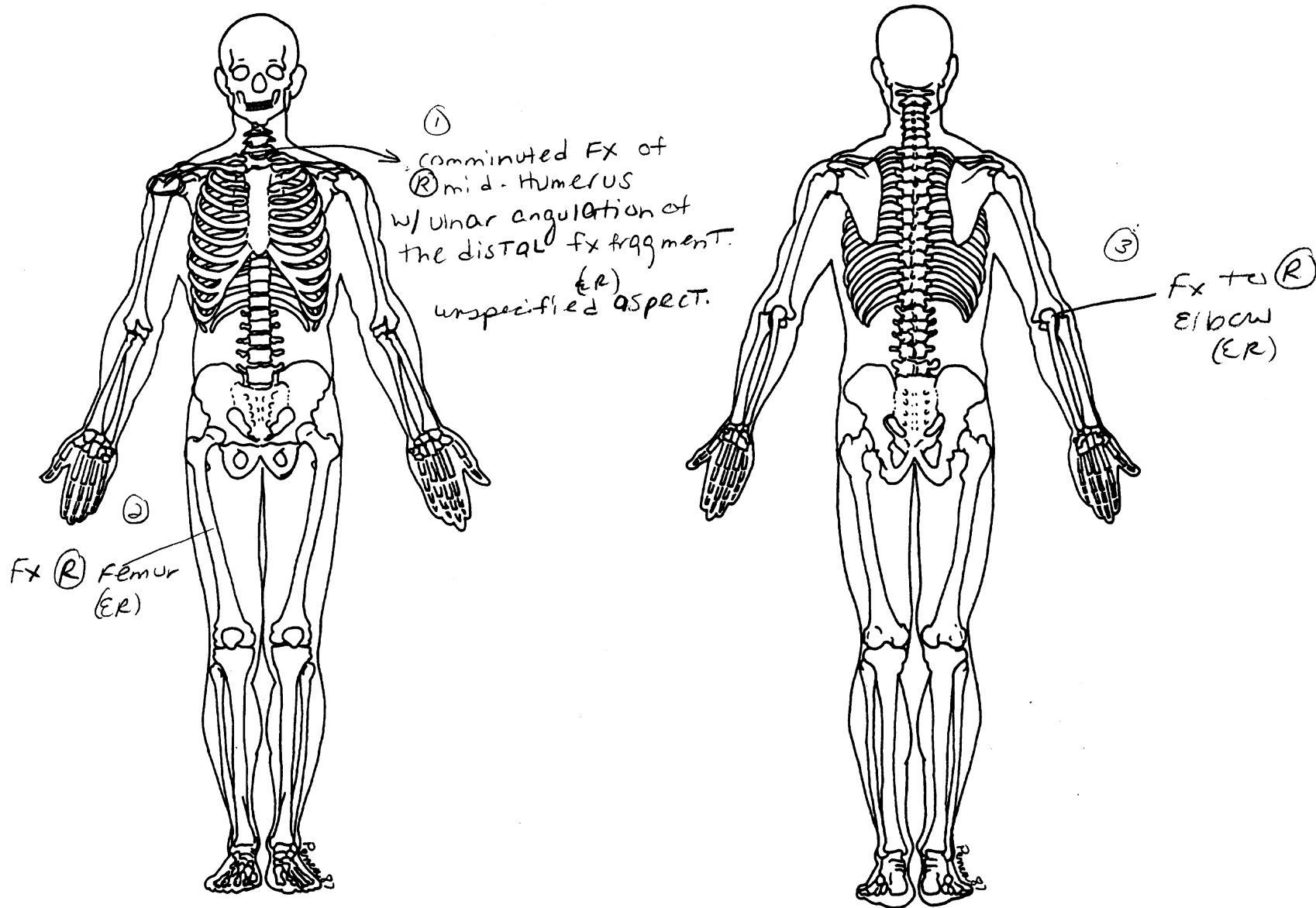
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

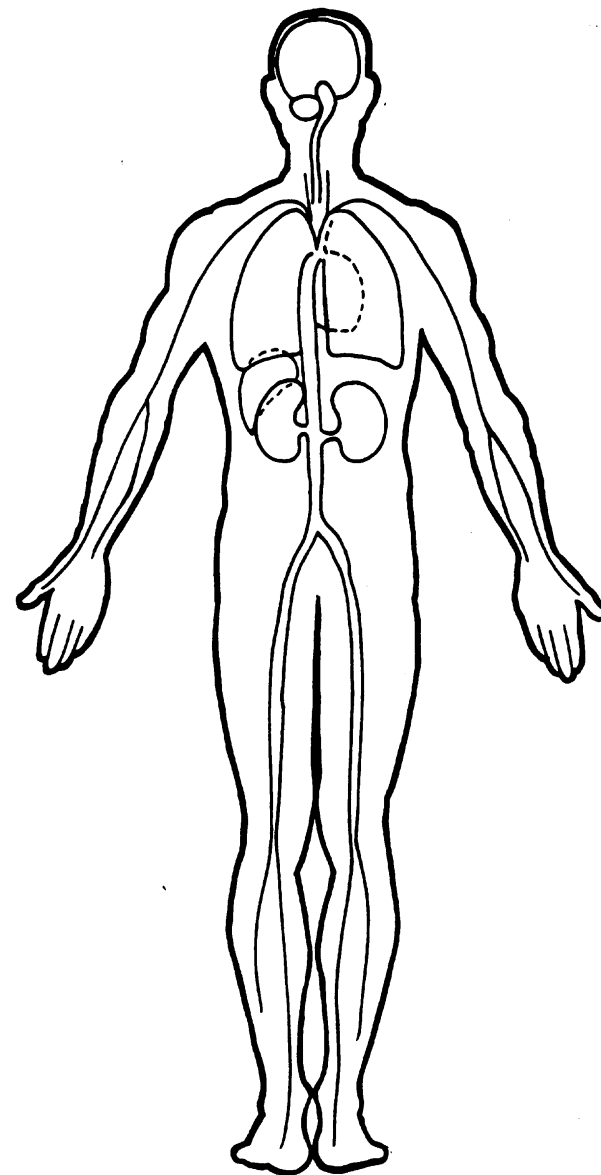
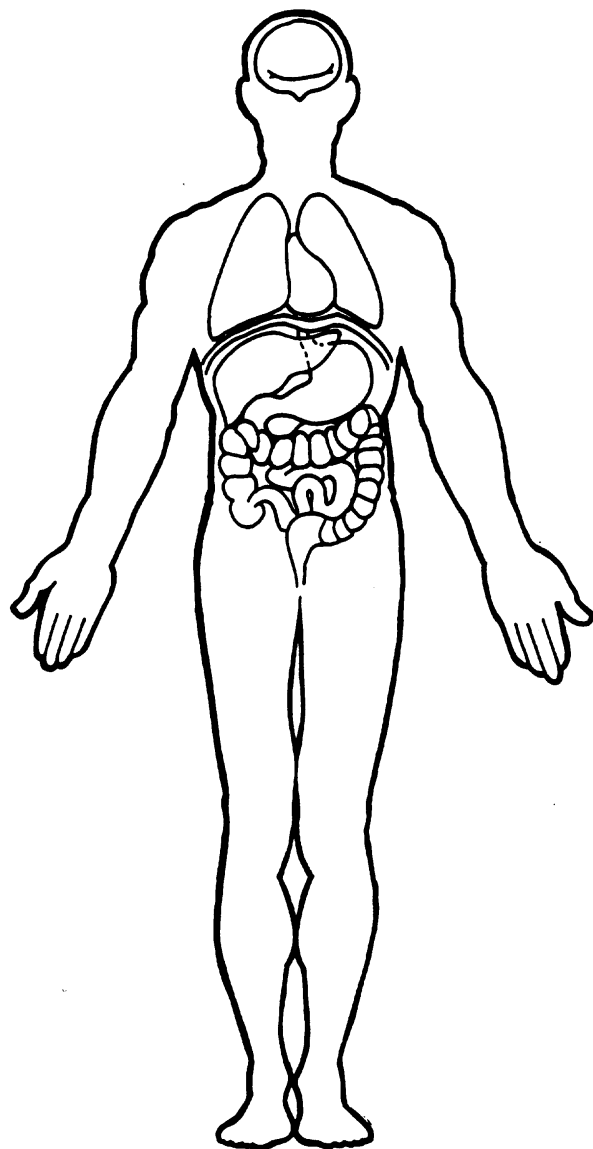
PERSONAL INJURY DATA—SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA—INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





UPDATE FORM

1. Primary Sampling Unit Number

41

2. Case Number — Stratum

052C

3. Vehicle Number

01

4. Occupant Number

04

Driver or Occupant Name: [REDACTED]

Address: _____

Other Information: _____

(Sanitize this section prior to Update submission.)

INJURY DATA CODED ON INITIAL SUBMISSION

O.I.C. — A.I.S.										Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
Source of Injury Data	Body Region	Aspect	Lesion	System Organ	A.I.S. Severity	Injury Source						
1st	5. <u>3</u>	6. <u>A</u>	7. <u>R</u>	8. <u>F</u>	9. <u>S</u>	10. <u>3</u>	11. <u>84</u>	12. <u>1</u>	13. <u>1</u>	14. <u>00</u>		
2nd	15. <u>3</u>	16. <u>T</u>	17. <u>R</u>	18. <u>F</u>	19. <u>S</u>	20. <u>3</u>	21. <u>84</u>	22. <u>1</u>	23. <u>1</u>	24. <u>00</u>		
3rd	25. <u>3</u>	26. <u>E</u>	27. <u>R</u>	28. <u>F</u>	29. <u>S</u>	30. <u>2</u>	31. <u>84</u>	32. <u>1</u>	33. <u>1</u>	34. <u>00</u>		
4th	35. <u>7</u>	36. <u>F</u>	37. <u>S</u>	38. <u>L</u>	39. <u>I</u>	40. <u>1</u>	41. <u>84</u>	42. <u>1</u>	43. <u>1</u>	44. <u>00</u>		
5th	45. —	46. —	47. —	48. —	49. —	50. —	51. —	52. —	53. —	54. —		
6th	55. —	56. —	57. —	58. —	59. —	60. —	61. —	62. —	63. —	64. —		
7th	65. —	66. —	67. —	68. —	69. —	70. —	71. —	72. —	73. —	74. —		
8th	75. —	76. —	77. —	78. —	79. —	80. —	81. —	82. —	83. —	84. —		
9th	85. —	86. —	87. —	88. —	89. —	90. —	91. —	92. —	93. —	94. —		
10th	95. —	96. —	97. —	98. —	99. —	100. —	101. —	102. —	103. —	104. —		

NOTE: If necessary, keep copy of original OI form and submit as part of update.

UPDATED CASE INFORMATION

	INITIAL			INITIAL	
	SUBMISSION	FINAL		SUBMISSION	FINAL
GV12. Alcohol Test Results for Driver	<u>96</u>	<u>96</u>	OA35. Treatment — Mortality	<u>9</u>	<u>3</u>
OA05. Occupant's Age	<u>17</u>	<u>17</u>	OA36. Type of Medical Facility (for Initial Treatment)	<u>2</u>	<u>2</u>
OA06. Occupant's Sex	<u>1</u>	<u>1</u>	OA37. Hospital Stay	<u>99</u>	<u>18</u>
OA07. Occupant's Height	<u>67</u>	<u>67</u>	OA38. Working Days Lost	<u>97</u>	<u>97</u>
OA08. Occupant's Weight	<u>172</u>	<u>172</u>	OA39. Time to Death	<u>00</u>	<u>00</u>
OA17. Manual (Active) Belt System Availability	<u>3</u>	<u>3</u>	OA40. 1st Medically Reported Cause of Death	<u>00</u>	<u>00</u>
OA18. Manual (Active) Belt System Use	<u>00</u>	<u>00</u>	OA41. 2nd Medically Reported Cause of Death	<u>00</u>	<u>00</u>
OA21. Automatic (Passive) Restraint System Availability	<u>0</u>	<u>0</u>	OA42. 3rd Medically Reported Cause of Death	<u>00</u>	<u>00</u>
OA22. Automatic (Passive) Restraint Function	<u>0</u>	<u>0</u>	OA43. Number of Recorded Injuries for This Occupant	<u>04</u>	<u>08</u>

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the unofficial and official sources prior to initial case submission **and from subsequently** acquired medical data. Remember not to double count an injury just because it was identified from two different sources.

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
1st	5. <u>32</u>	6. <u>A</u>	7. <u>R</u>	8. <u>F</u>	9. <u>S</u>	10. <u>3</u>	11. <u>84</u>	12. <u>1</u>	13. <u>1</u>	14. <u>60</u>
2nd	15. <u>32</u>	16. <u>I</u>	17. <u>R</u>	18. <u>F</u>	19. <u>S</u>	20. <u>3</u>	21. <u>84</u>	22. <u>1</u>	23. <u>1</u>	24. <u>00</u>
3rd	25. <u>3</u>	26. <u>E</u>	27. <u>R</u>	28. <u>F</u>	29. <u>S</u>	30. <u>2</u>	31. <u>84</u>	32. <u>1</u>	33. <u>1</u>	34. <u>00</u>
4th	35. <u>72</u>	36. <u>F</u>	37. <u>S</u>	38. <u>L</u>	39. <u>I</u>	40. <u>1</u>	41. <u>84</u>	42. <u>1</u>	43. <u>1</u>	44. <u>00</u>
5th	45. <u>32</u>	46. <u>W</u>	47. <u>R</u>	48. <u>F</u>	49. <u>S</u>	50. <u>2</u>	51. <u>84</u>	52. <u>1</u>	53. <u>1</u>	54. <u>00</u>
6th	55. <u>32</u>	56. <u>L</u>	57. <u>R</u>	58. <u>F</u>	59. <u>S</u>	60. <u>3</u>	61. <u>84</u>	62. <u>1</u>	63. <u>1</u>	64. <u>00</u>
7th	65. <u>2</u>	66. <u>F</u>	67. <u>U</u>	68. <u>F</u>	69. <u>S</u>	70. <u>3</u>	71. <u>97</u>	72. <u>9</u>	73. <u>7</u>	74. <u>00</u>
8th	75. <u>2</u>	76. <u>R</u>	77. <u>U</u>	78. <u>U</u>	79. <u>N</u>	80. <u>2</u>	81. <u>97</u>	82. <u>9</u>	83. <u>7</u>	84. <u>00</u>
9th	85. ____	86. ____	87. ____	88. ____	89. ____	90. ____	91. ____	92. ____	93. ____	94. ____
10th	95. ____	96. ____	97. ____	98. ____	99. ____	100. ____	101. ____	102. ____	103. ____	104. ____
11th	105. ____	106. ____	107. ____	108. ____	109. ____	110. ____	111. ____	112. ____	113. ____	114. ____
12th	115. ____	116. ____	117. ____	118. ____	119. ____	120. ____	121. ____	122. ____	123. ____	124. ____
13th	125. ____	126. ____	127. ____	128. ____	129. ____	130. ____	131. ____	132. ____	133. ____	134. ____
14th	135. ____	136. ____	137. ____	138. ____	139. ____	140. ____	141. ____	142. ____	143. ____	144. ____
15th	145. ____	146. ____	147. ____	148. ____	149. ____	150. ____	151. ____	152. ____	153. ____	154. ____
16th	155. ____	156. ____	157. ____	158. ____	159. ____	160. ____	161. ____	162. ____	163. ____	164. ____
17th	165. ____	166. ____	167. ____	168. ____	169. ____	170. ____	171. ____	172. ____	173. ____	174. ____
18th	175. ____	176. ____	177. ____	178. ____	179. ____	180. ____	181. ____	182. ____	183. ____	184. ____
19th	185. ____	186. ____	187. ____	188. ____	189. ____	190. ____	191. ____	192. ____	193. ____	194. ____
20th	195. ____	196. ____	197. ____	198. ____	199. ____	200. ____	201. ____	202. ____	203. ____	204. ____

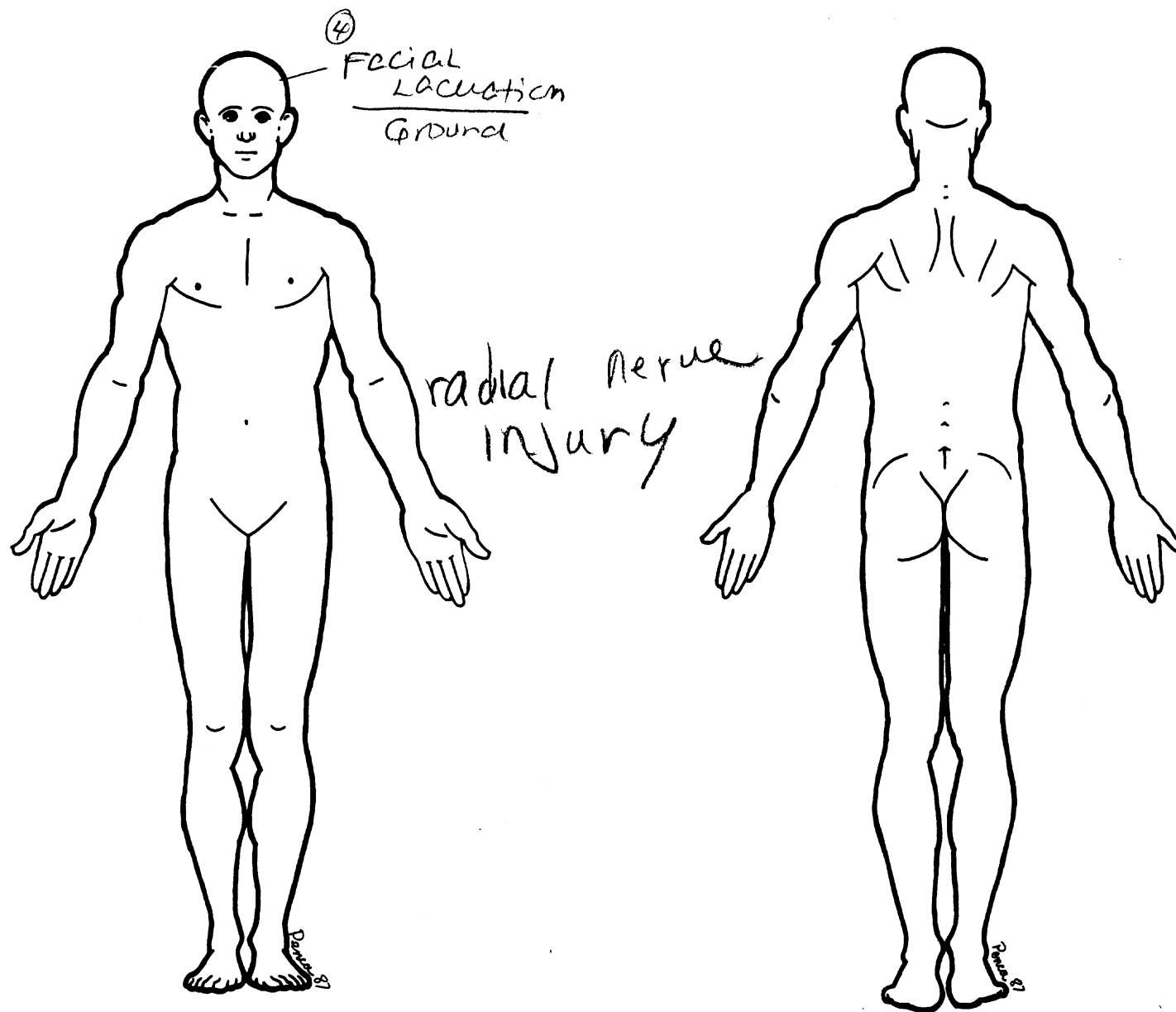
If greater than 20 injuries, code additional on Occupant Injury Data Supplement.

OCCUPANT INJURY DATA SUPPLEMENT

	Source of Injury Data	O.I.C. – A.I.S.					Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion No.
		Body Region	Aspect	Lesion	System Organ	A.I.S. Severity				
21st	—	—	—	—	—	—	— — —	—	—	— — —
22nd	—	—	—	—	—	—	— — —	—	—	— — —
23rd	—	—	—	—	—	—	— — —	—	—	— — —
24th	—	—	—	—	—	—	— — —	—	—	— — —
25th	—	—	—	—	—	—	— — —	—	—	— — —
26th	—	—	—	—	—	—	— — —	—	—	— — —
27th	—	—	—	—	—	—	— — —	—	—	— — —
28th	—	—	—	—	—	—	— — —	—	—	— — —
29th	—	—	—	—	—	—	— — —	—	—	— — —
30th	—	—	—	—	—	—	— — —	—	—	— — —
31st	—	—	—	—	—	—	— — —	—	—	— — —
32nd	—	—	—	—	—	—	— — —	—	—	— — —
33rd	—	—	—	—	—	—	— — —	—	—	— — —
34th	—	—	—	—	—	—	— — —	—	—	— — —
35th	—	—	—	—	—	—	— — —	—	—	— — —
36th	—	—	—	—	—	—	— — —	—	—	— — —
37th	—	—	—	—	—	—	— — —	—	—	— — —
38th	—	—	—	—	—	—	— — —	—	—	— — —
39th	—	—	—	—	—	—	— — —	—	—	— — —
40th	—	—	—	—	—	—	— — —	—	—	— — —
41st	—	—	—	—	—	—	— — —	—	—	— — —
42nd	—	—	—	—	—	—	— — —	—	—	— — —
43rd	—	—	—	—	—	—	— — —	—	—	— — —
44th	—	—	—	—	—	—	— — —	—	—	— — —
45th	—	—	—	—	—	—	— — —	—	—	— — —

OFFICIAL INJURY DATA – SOFT TISSUE INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital medical records
- (2) Hospital medical records other than emergency room (eg. discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add-on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A-pillar, instrument panel, mirror (passenger side only)
- (16) Other front object (specify): _____

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A pillar
- (23) Left B pillar
- (24) Other left pillar (specify): _____
- (25) Left side window glass or frame

- (26) Left side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, or roof side rail
- (27) Other left side object (specify): _____

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31) Right side hardware or armrest
- (32) Right A pillar
- (33) Right B pillar
- (34) Other right pillar (specify): _____
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A-pillar, B-pillar, roof side rail
- (37) Other right side object (specify): _____

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify): _____
- (44) Head restraint system
- (45) Air cushion
- (46) Other occupants (specify): _____
- (47) Interior loose objects
- (48) Child safety seat (specify): _____
- (49) Other interior object (specify): _____

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor including toe pan
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify): _____

EXTERIOR OF OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify): _____

- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify): _____
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify): _____

- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify): _____

- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify): _____

- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify): _____
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

O.I.C. Body Region

- (M) Abdomen
- (Q) Ankle-foot
- (A) Arm (upper)
- (B) Back-thoracolumbar spine
- (C) Chest
- (E) Elbow
- (F) Face
- (R) Forearm
- (H) Head-skull
- (U) Injured, unknown region
- (K) Knee
- (L) Leg (lower)
- (Y) Lower limb(s) (whole or unknown part)
- (N) Neck-cervical spine
- (P) Pelvic-hip
- (S) Shoulder
- (T) Thigh
- (X) Upper limb(s) (whole or unknown part)
- (O) Whole body

- (W) Wrist-hand

Aspect of Injury

- (A) Anterior-front
- (C) Central
- (I) Inferior-lower
- (U) Injured, unknown aspect
- (L) Left
- (P) Posterior-back
- (R) Right
- (S) Superior-upper
- (W) Whole region

Lesion

- (A) Abrasion
- (M) Amputation
- (V) Avulsion
- (B) Burn
- (K) Concussion
- (C) Contusion
- (N) Crush

- (G) Detachment, separation

- (D) Dislocation
- (F) Fracture
- (Z) Fracture and dislocation
- (U) Injured, unknown lesion
- (L) Laceration
- (O) Other
- (P) Perforation, puncture
- (R) Rupture
- (S) Sprain
- (T) Strain
- (E) Total severance, transection

System/Organ

- (W) All systems in region
- (A) Arteries-veins
- (B) Brain
- (D) Digestive
- (E) Ears
- (O) Eye
- (H) Heart
- (U) Injured, unknown system

- (I) Integumentary

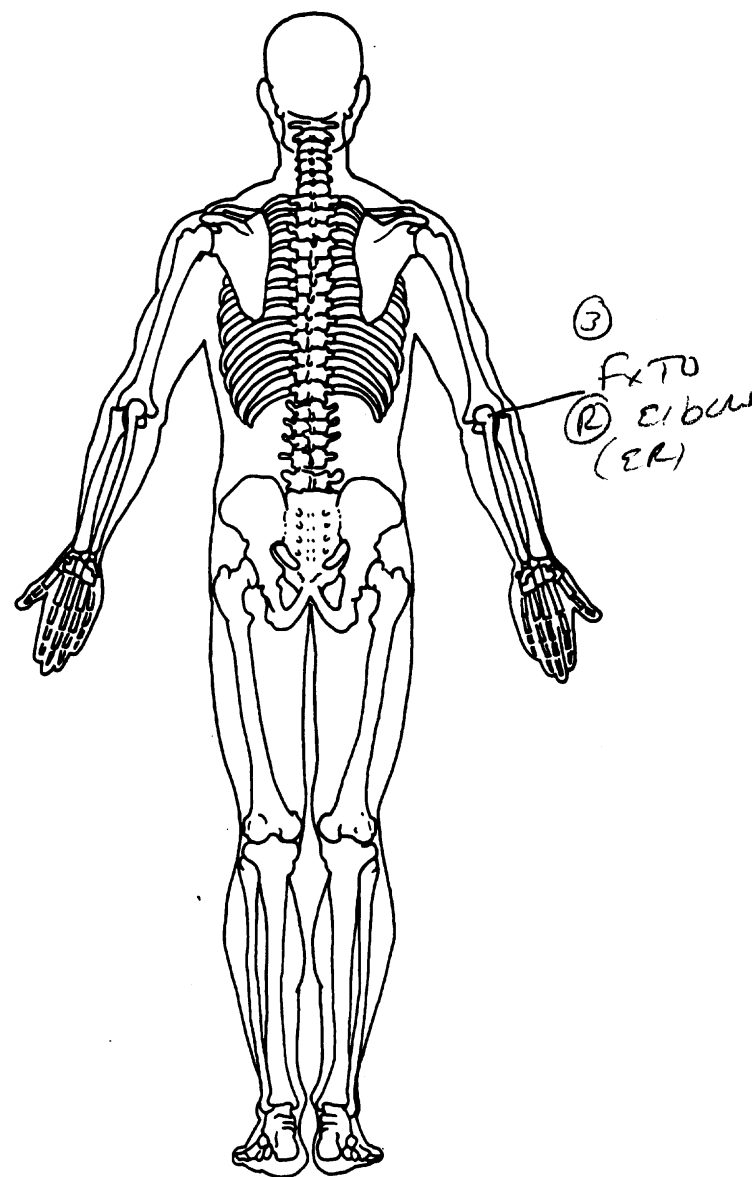
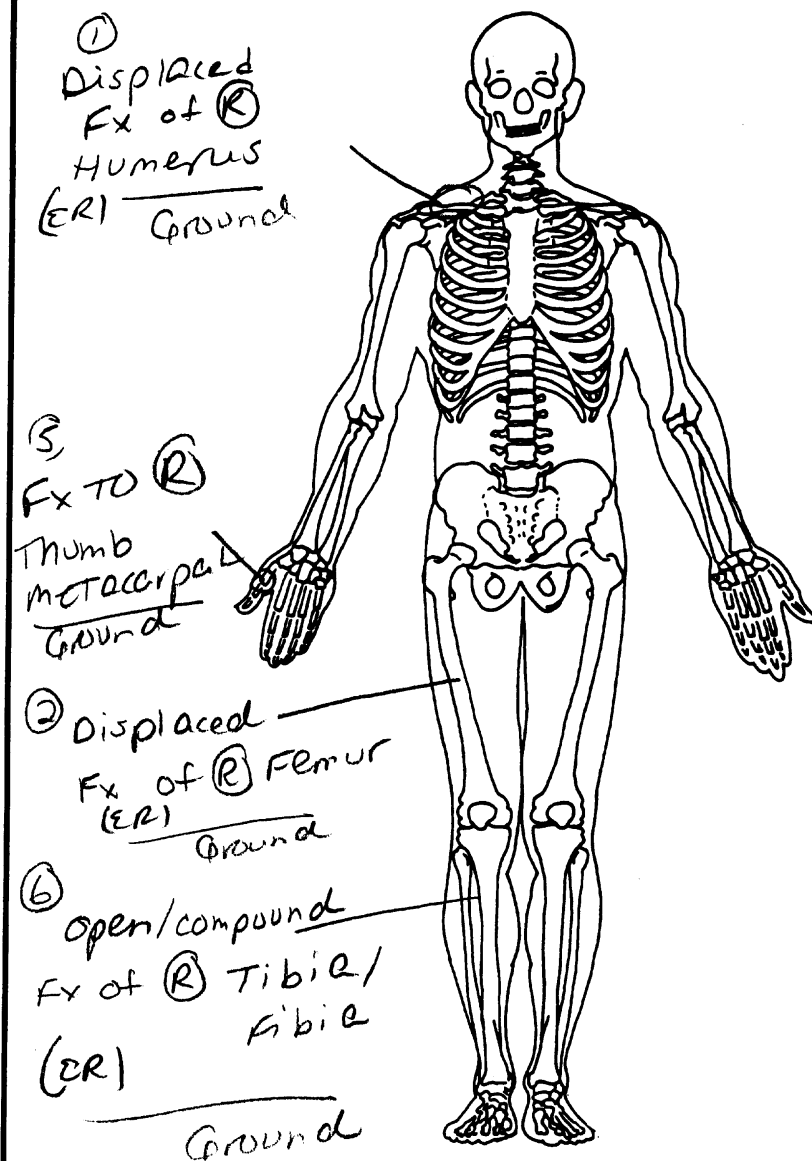
- (J) Joints
- (K) Kidneys
- (L) Liver
- (M) Muscles
- (N) Nervous system
- (P) Pulmonary-lungs
- (R) Respiratory
- (S) Skeletal
- (C) Spinal cord
- (Q) Spleen
- (T) Thyroid, other endocrine gland
- (G) Urogenital
- (V) Vertebrae

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

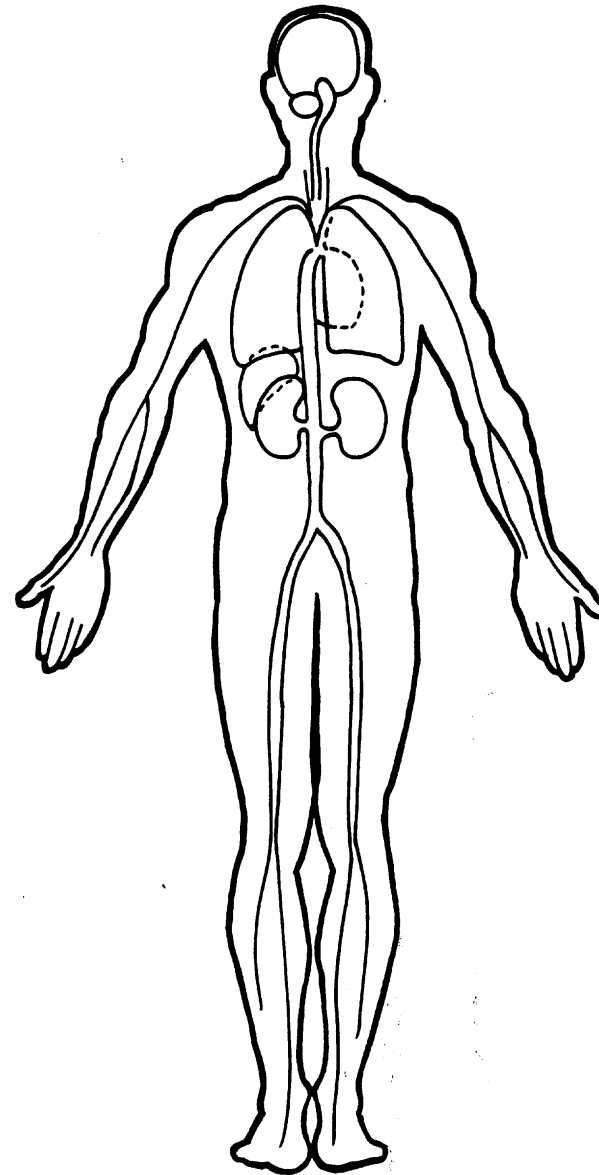
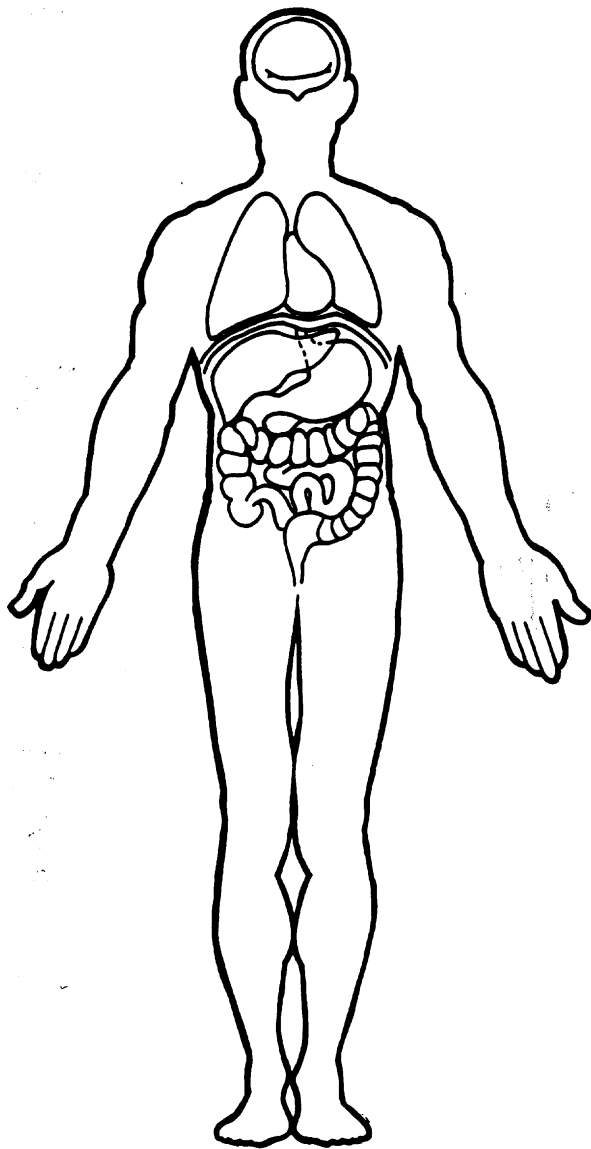
OFFICIAL INJURY DATA – SKELETAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA – INTERNAL INJURIES

Indicate the *Location, Lesion, Detail* (size, depth, fracture type, head injury clinical signs and neurological deficits), and *Source* of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



5
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Current Processing Year --> 1988

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1988 NATIONAL ACCIDENT SAMPLING SYSTEM

ERROR SUMMARY SCREEN

1988

CURRENT VERSION: 1.12

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	0	0	Y
Vehicle Exterior	0	0	0	Y
Vehicle Interior	0	0	0	Y
Occupant Assessment	0	0	0	Y
Occupant Injury	0	0	0	Y
Total Inter Errors		0	0	
Total Case Errors	0	0	0	



SLIDE INDEX

Primary Sampling Unit Number <u>41</u>			Case Number--Stratum <u>052C</u>
Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter
1-3	01	S	Travel path of vehicle (in center lane) unable to get out there in middle on interstate
4	01	N	Lookback on Travel paths.
5-7	01	S.E.	Vehicle Tire marks - vehicle now is facing Northwest after spinning counterclockwise
8-12	01	-	Guardrail contacted by vehicle's Right side
13	01	-	Part of Guardrail where vehicle departed
14-16	01	S.W.	Vehicle crossing over 3 Lane Highway
17-18	01	N.E.	Lookback on Gauge marks
19	01	S.W.	A.P.O.I
20	01	N.E.	Lookback on A.P.O.I
21	01	-	Approximate Final Rest of Driver
22-23	01	-	Occupants 3+4 Approximate Final Rest
24-26	01	-	Front of vehicle, also Impact #2
27	01	-	Contour Gauge set to where bumper corners would be believed to have been.
28	01	-	Windshield
29-31	01	-	Left side of vehicle.
32-33	01	-	Back of vehicle
34-35	01	-	Rear window where occupants 3+4 from back seat were ejected.
36-38	01	-	Right side of vehicle & Contour Gauge Impact #1
39	01	-	Right side Back Damage.
40	01	-	Restricted Right Rear Tire.
41-43	01	-	Right side of vehicle.

[illegible]



PSU 41-052C (1988) #1
Best Available



PSU 41-052C (1988) #2



PSU 41-052C (1988) #3



PSU 41-052C (1988) #4



PSU 41-052C (1988) #5



PSU 41-052C (1988) #6



PSU 41-052C (1988) #7



PSU 41-052C (1988) #8



PSU 41-052C (1988) #9



PSU 41-052C (1988) #10



PSU 41-052C (1988) #11



PSU 41-052C (1988) #12



PSU 41-052C (1988) #13



PSU 41-052C (1988) #14



PSU 41-052C (1988) #15



PSU 41-052C (1988) #16



PSU 41-052C (1988) #17



PSU 41-052C (1988) #18



PSU 41-052C (1988) #19



PSU 41-052C (1988) #20



PSU 41-052C (1988) #21



PSU 41-052C (1988) #22



PSU 41-052C (1988) #23



PSU 41-052C (1988) #24



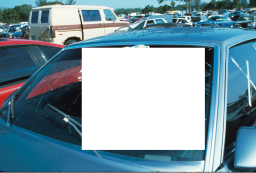
PSU 41-052C (1988) #25



PSU 41-052C (1988) #26



PSU 41-052C (1988) #27



PSU 41-052C (1988) #28



PSU 41-052C (1988) #29



FSU 41-052C (1988) #30



PSJ 41-052C (1988) #31



PSU 41-052C (1988) #32



PSU 41-052C (1988) #33



PSU 41-052C (1988) #34



PSU 41-052C (1988) #35



PSU 41-052C (1988) #36



PSU 41-052C (1988) #37



PSU 41-052C (1988) #38



PSU 41-052C (1988) #39



PSU 41-052C (1988) #40



PSU 41-052C (1988) #41



PSU 41-052C (1988) #42



PSU 41-052C (1988) #43



PSU 41-052C (1988) #44



PSU 41-052C (1988) #45



PSU 41-052C (1988) #46



PSU 41-052C (1988) #47



PSU 41-052C (1988) #48



PSU 41-052C (1988) #49



PSU 41-052C (1988) #50



PSU 41-052C (1988) #51



PSU 41-052C (1988) #52



PSU 41-052C (1988) #53



PSU 41-052C (1988) #54



PSU 41-052C (1988) #55



PSU 41-052C (1968) #58